



HAROLD B. LEE LIBRARY  
BRIGHAM YOUNG UNIVERSITY  
PROVO, UTAH

HAROLD B. LEE LIBRARY  
BRIGHAM YOUNG UNIVERSITY  
PROVO, UTAH

HAROLD B. LEE LIBRARY  
BRIGHAM YOUNG UNIVERSITY  
PROVO, UTAH







SEX SEARCHLIGHTS

AND

SANE SEX ETHICS







DR. LEE ALEXANDER STONE



301. 41  
St 71.2

# Sex Searchlights and Sane Sex Ethics

## *An Anthology of Sex Knowledge*

*Edited by* LEE ALEXANDER STONE, M.D.

Late Official War Department Lecturer and Instructor to Troops in Social Hygiene and Venereal Disease Control; Major M.C.U.S.R.; Regional Consultant U.S. Public Health Service; Surgeon (R) U.S.P.H.S.; Professor Social Hygiene, Chicago Training School for Home and Public Health Nursing; Instructor in Social Hygiene to Graduates of Training School of The Illinois Bell Telephone Company; Medical Officer Theodore Roosevelt Post No. 627 American Legion; Member Staff Illinois Social Hygiene League; former Chief of Bureau of Hospital Control, Social and Industrial Hygiene, Department of Health, Chicago; Fellow American Medical Association; Chicago Academy of Medicine; Member Illinois State Medical Society; Chicago Medical Society; American Institute of Criminal Law and Criminology; American Social Hygiene Association; former member Vice Commission Memphis, Tenn.; former Lecturer Medical Sociology, University of Tennessee, College of Medicine (Memphis); Author: "Eugenics and Marriage" "The Woman of the Streets"; "The Hidden Menace"; "Eugenically Speaking"; "Sex Discussion"; "An Open Talk with Mothers and Fathers," etc., etc.

*"I would be pure, for there are those that trust me;  
I would be true, for there are those that care;  
I would be strong, for there is much to suffer;  
I would be brave, for there is much to dare;  
I would be friend of all—the foe—the friendless;  
I would be giving and forget the gift;  
I would be humble, for I know my weakness;  
I would look up—and laugh—and love—and lift."*

CHICAGO  
SCIENCE PUBLISHING COMPANY

*Uninc.*

1922

COPYRIGHT 1922

SCIENCE PUBLISHING COMPANY

Uninc.

PRINTED IN THE UNITED STATES OF AMERICA

HAROLD B. LEE LIBRARY  
BRIGHAM YOUNG UNIVERSITY  
PROVO, UTAH





## A LETTER TO DOROTHY

By DR. LEE ALEXANDER STONE

My Dear Little Girl:

This is your twelfth birthday, and I wish you many happy returns of the day. May love and happiness attend you wherever you go, and may you never want for friends.

You are almost ready to enter your teens, a whole life is ahead of you. You will soon no longer be a child, but a young lady. With young womanhood comes the first real taste of what life means. Joys and sorrows will be yours and I want to arm you against the things you will have to endure. The pain of disappointment will come to you many times; learn to fortify yourself against it by thinking pure and happy thoughts.

Remember that the men and women who accomplish things in this world today are those who laugh in the face of adversity and vow not to be beaten.

Learn to smile yourself and soon others will smile with you, and happiness will come from the most unexpected sources.

Be a carrier of joy, bubble over with happiness, force your mind to dwell on wholesome things.

Remember, sweetheart, that your body is a temple erected by Mother Nature wherein worshipers come to pray before the shrine of humanity. If you keep your body clean, both inside and out, impure worshipers cannot remain long, for the impure things in life come only when our minds and bodies offer no resistance to them.

Remember always that there once lived in Nazareth a Holy Man who showed by His example the possibilities of cleanly living and pure thinking. Read the life of Jesus, view Him as a man, and emulate His example as far as you are able. He said, "Do unto others as you would have that they should do unto

you." I want you to know that a life of service is the happiest one to lead. Serve others joyously and your reward will be great.

Carry with you the message of charity and brotherly love.

Love everybody, keep hate out of your soul—it has soured the lives of many who should have been the constant bearers of messages of joy.

Read good books, and think deeply over what you read. You will find that when all have failed to please you and your soul is tired and hungry for sympathy that joy may be found between the covers of a well-written book.

Take plenty of exercise, breathe good air, bathe often and keep your mind busy.

Fortunately, you are living in the "Age of Woman"; therefore, I may say to you—amount to something. Vow to be more than a parlor ornament, vow to do something that will place your name among the annals of the blessed.

You possess talents far above those possessed by the average little girl, develop them, let your light shine as a beacon to guide others into the path of action. Dream of good things to come and vow to be ready to receive them when they do come.

Be just, be generous, be kind to those around you, so that when dark days come you will have plenty of friends to help you bear your trouble.

Your father and mother love you very dearly, we are ambitious for you, and will help you as far as you will let us. Come to us with whatever you care to, make us your confidants and remember that we will advise you in the best manner possible.

May God bless my little girl, and keep her strong in body, mind, and spirit, and make her ever ready to take advantage of her divine attributes, is the prayer of your father.



## PREFACE

**I**T IS a sad commentary upon the intelligence and real purity of the thought of modern civilization, that the subject of the "why and wherefore" of sex should be regarded by so many as something to be avoided as impure, and not "respectable." Even the most elementary consideration of the subject must show us that a scientific knowledge of the important principles of sex manifestation is vitally essential for the best interests of race-preservation and race-culture.

Our sex morality is rigorous in theory; but in practice it is full of laxities, inequalities, and often cruelty, especially towards women. Seduction, illegitimate births, infanticide, purposive abortion, prostitution and racial poisoning, sex vices and abnormalities, all flourish under our chaotic code. Can it be said that our attitude to the supremely important questions related to and revolving around the sex-relationship is sane, practical and humane? The evils and the suffering are not necessary, inevitable or irremediable. Some of them could be banished and others greatly lessened, if not entirely removed, by sensible social hygiene, and the upraising of finer ideals of love, marriage and parentage.

When experienced physicians tell us that the sex-life of the mothers of the race is "terribly neglected"; that scarcely one man in twelve knows anything of the psychology and physiology of woman before marriage, and very few learn what should be known after marriage; that ignorance in sex matters is "appalling," especially among women; that this ignorance leads in women, and also, in men to such mental disturbance as psychosis, neurosis, hysteria and depression; that thousands of feeble and ailing children are born through the errors of parents, and that fifty per cent of infantile deaths are preventable—we may ask whether our civilization is real or spurious.

Ignorance, reticence and prudery have darkened and distorted the subject of sex, but people have at last begun to realize that the immense importance of the "sex question" will no longer allow it to be hid away as a thing to be ashamed of. We are living in an age of plain thinking and frank speech. Subjects

spoken of in whispers ten years past are now discussed freely. Why is it, then, that the most important question in the world—the question upon which the future of the human race depends, is kept a dark and mysterious secret? Why is it that so many young people are allowed to stumble along in blind ignorance, often wrecking not only their own lives, but lives of others as well, when it is so easy to teach them?

It is a terrible mistake to permit young people to marry with only the crudest knowledge of the truth of married life, or without any knowledge whatever. A society that permits such a sin against present and future generations has no claim to be considered as humane or intelligent.

Ignorance and innocence have too long been thought to be synonymous and too many parents live in the fool's paradise of belief that their silence spells ignorance and innocence on the part of their children.

Is it reasonable to suppose that ardor and passion will take possession of a shy, utterly inexperienced woman, who is suddenly, tactlessly, and as often happens, roughly thrust into wedlock. On the other hand the average young man is often insufficiently instructed in marital hygiene or imbued with an adequate understanding of the nature of woman.

It is the consensus of opinion of numerous physicians, ministers, and lawyers that a very large proportion of matrimonial disharmonies have their foundation in the common misunderstanding of the physiology and especially of the psychology of sex; and one noted sexologist makes the bold unequivocal statement that every case of divorce has for its basis the lack of sexual satisfaction. This, in the opinion of many students of sexual problems, is the strongest reason for sex instruction.

Out of the World War, along with all the suffering and destruction has come much good. One benefit was the many urgent lessons for the need of rational sex enlightenment to counteract the great amount of unhappiness caused by the false delicacy and prudery which surrounds the sex nature with absurd mystery, and the creation of an American plan for banishing the vast amount of ill being, pain and death caused by prostitution and venereal disease.

Up to the time of the war, the American health officer, with his brilliant record for conquering such lesser evils as tuberculosis,

yellow fever, typhoid fever, smallpox and malaria, felt that the venereal diseases were entirely outside his field. He accepted the dictum that they were "different." As a result, venereal diseases maintained their prevalence and the cases were not even counted. Society paid for its neglect in wrecked homes, childless marriages, invalidism, blindness and insanity.

It was found that most of the cases of venereal disease among our soldiers were contracted before the men came into the camp. In fact, over five-sixths of the venereal disease treated in the army in America up to the time of the armistice, was acquired before the boys put on the uniform. This evidence showed that the environment of the home town was more dangerous to the health of young men of draft age than the carefully guarded surroundings of the camp.

Venereal diseases have been found not infrequently in our public schools and colleges. Yet no word as to their character or existence is permitted to be said in some of the schools, even to the more mature pupils. How long must such a debauchment of American manhood continue? What an enormous bill of damages must be laid to the door of false modesty, prudery and "social cowardice."

Venereal diseases, shielded by the "Anglo-Saxon sense of prudery," are doing enormous damage to the race. The lack of correct information among the masses of the people as to their extent and danger, constitutes one of the most menacing problems of American civilization.

Parents and taxpayers should bear this in mind. Instruction in social hygiene is the cheapest, yet best-paying investment that can be made by any community. An ounce of disease prevention in the way of education is worth a pound of heavy taxation cure to take care of disease consequences.

Gonorrhea and syphilis together, it is estimated, are costing the people of the United States approximately \$3,000,000,000 annually. Introduced into the marriage relation, these two diseases strike at the very foundation of the present social order. They impose a burden of physical and mental suffering upon humanity which has now become intolerable.

They collect a heavier toll every year than did bullets, shells, gas, air-bombs—all the ghastly, wholesale killers of the late World War. Yet these two diseases present no mystery to the



modern physician. They may be cured; and their infection can be checked at its source. Why, then, have we not acted, we who thought we were civilized? Because we have been too nice, too rotten, nasty nice, to organize and come out in open fight against syphilis and gonorrhea.

Rupert Blue, former Surgeon General of the U. S. Public Health Service says that Gonorrhea and Syphilis constitute the most urgent, vital health problem confronting the country today. From time immemorial these diseases have been the scourge of manhood, flourishing in the darkness of ignorance and striking inexorably the innocent and helpless as well as the guilty. Now they must be exposed to the cleansing light of universal knowledge.

The literature on Sex Physiology and Sex Psychology embraces many worthless books and upon investigation it will be found that the average library contains many books that are calculated to arouse and appeal to the passions, but very little is to be found that is really instructive or acts as food for thought upon the topic that greatly affects all classes and kinds of people. An effort has been made to present herewith something solid and to give only scientific and established facts—such as will better enable those who are interested and consulted upon these matters to obtain and impart rational information.

With this object in mind, and the determination to disregard the remnants of prudery which still survive among us, certain features that have been only touched on in many leading works of sexology, and that are still more often ignored, are here given the consideration that their importance warrants. This is especially true of the birth control movement, with its intensely interesting and romantic history. This movement, which is now exercising a tremendous influence upon the population, and no less upon the conjugal relations of countless people, throughout the civilized world, is inseparably bound up with the problems of the sex. The biological, social and ethical bases of birth control are factors that cannot be ignored in a broad and truthful presentation of the sex question.

Great care has been used to produce a book that is chaste in thought and diction, but in spite of the best intentions, a scientific book on sex-physiology and sex-psychology is likely to appear, at least in spots, to gratify a low curiosity; but in "Sex

Searchlights" there is no such taint and if the physiology and psychology of sex is discussed with a frankness that may seem brutal to some—*it is necessary*.

On the whole, the gain from giving earnest men and women the facts they need, seems likely to outweigh by much any harm that might possibly be done to such light minds as will be misled, or to such sentimental minds as will be wounded, by enlightenment about sex, for if ignorance were bliss it might be folly to be wise; but where ignorance leads to prostitution, divorce, ill health, neurosis, unhappiness, it were better to be wise, even at the price of some shock to the sensibilities of those reared under and adhering to the old traditions.

No claim to originality is made by the editor. Many books and pamphlets written by thoughtful authors, who have given much of their learning that the problems of social hygiene might approach, in part at least, a solution, have been consulted and their contents used in most instances, given full credit.

The thanks of the world are due to these pioneers who have blazed, in part at least, a trail into the dark forest of ignorance and prurience, and have blasted the hopes of those, who, because of lack of humanism would punish any who might step from the straight and narrow path of self-righteousness, which being properly interpreted, means the path of the serpent, into that one filled with the joys of well-balanced thought free from bias and social hypocrisy.

LEE ALEXANDER STONE, M. D.

CHICAGO, *December, 1921.*





## PREFACE TO FOURTH EDITION

It is always gratifying to an author that the child of his brain has been well received by the reading public. *SEX SEARCHLIGHTS* has had a very extensive sale. The first edition was published January 15, 1922. To date three large editions have been published, and now, when less than a year old, a fourth edition becomes necessary. Its distribution has been universal. Calls have come for it from all over the world, and in the United States its readers may be found everywhere.

Certain changes have been deemed advisable. The special drawings which appeared in the first edition, have been eliminated, and additional reading matter has been included. A few have criticized the book because of the last chapters which contain stories and incidents of real life. I offer no apology for having included this material.

*SEX SEARCHLIGHTS* was written with the thought in the mind of its editor to reach the majority with appeals of human interest that would so affect their minds as to drive home the principles of social hygiene in such a way as to cause them to react favorably towards the teaching of fundamental facts about life and its reproduction, to children, that they may grow up with a higher sex purpose in mind.

The perfect sex book has not yet, and never can be written because human intelligence cannot grasp all of the glories of life—life and love being bound up in the sex impulse. It is beyond the power of any one man to acquire *all* the facts pertaining to sex hygiene.

I have spent many years of my life in the study of the various problems of sex, and have gleaned from my personal library of over five thousand volumes many vital truths which I have set forth in *SEX SEARCHLIGHTS*, with the hope that they might be received by the public in the spirit of a contribution intended to benefit and advance the happiness of humanity.

Life should be to all one grand romance, for around the word "romance" is centered all effort. Romance has to do with love, and love, being biologic, has to do with the mating of beings of opposite sex.

Since the time of the separation of the sexes, a struggle—decreed by a fixed biologic law—that of refilling places made vacant by those who have died—has been taking place. The first musical note ever struck was the outcome of that Divine attunement which comes only when beings of opposite sex determine that neither the one nor the other may be happy except they become as one in the nuptial embrace. The final result of this embrace should be the birth of an offspring that would reflect credit on its forbears.

Some may deny that physical and psychical union is necessary before the best from a biologic standpoint may be produced. Such a denial is disproven even in the breeding of lower forms. When the ultimate of attainment in higher breeding is demanded, it is necessary to bring together in sexual union only those biologic elements which, when brought into juxtaposition, reach the very heights whereon may be found types which make the world a better place in which to live.

I am grateful for the many hundreds of letters received from readers of SEX SEARCHLIGHTS, and for the praise contained in them. My one object in bringing out such a book was the hope that they who read it might glean therefrom facts that would prove beneficial.

LEE ALEXANDER STONE, M. D.

Chicago, October, 1922.

25 East Washington St.

## SOCIAL HYGIENE MAXIMS

By DR. LEE ALEXANDER STONE

*Syphilis is the greatest cause of death, not excepting tuberculosis.*

\* \* \* \* \*

*Gonorrhea causes eighty per cent of all blindness in the eyes of the new-born.*

\* \* \* \* \*

*Man's birthright of force and stability is always weakened by syphilitic poison even after a cure.*

\* \* \* \* \*

*Thirty-three and one-third per cent of all insanity is caused by syphilis or its end-results.*

\* \* \* \* \*

*Parents, give your children a square deal. When they ask you "Where Did I Come From?" tell them the truth.*

\* \* \* \* \*

*Tuberculosis kills, syphilis kills, maims, causes insanity and crime; reaches into the family from grandfather to little grandchild.*

\* \* \* \* \*

*Society has been drunk with prudery. Like all maudlin drunkards it is suffering from the effects. Take the cure! Know thyself.*

\* \* \* \* \*

*It is estimated that there are over ten million cases of syphilis, acquired and hereditary, in the United States, a large part of which remains untreated.*

\* \* \* \* \*

*Venereal diseases exist mainly because Society still places a taboo on the mention of the natural forces of the body which lead to the reproduction of the species and refuses to allow them to be discussed.*

*Ignorance does not necessarily mean innocence. Ignorance of self has caused many boys and girls to take steps downward that they might have refrained from taking had they been instructed by those who brought them into the world.*

\*   \*   \*   \*   \*

*The reproductive function is divine and is deserving of a place on the shrine of life before which those called into existence by its force must bow. Nature never intended that what she controls should ever be looked upon as being unclean.*

\*   \*   \*   \*   \*

*"Why did not you tell me the truth about myself, when I asked for it?" is the heartbreaking question asked of many parents by daughters whose ignorance had been taken advantage of and who had learned the truth too late to save themselves.*

\*   \*   \*   \*   \*

*Nature never intended that a mother should bear any other than a healthy offspring. False Ethical Standards and "Wild Oats Sowing" have decreed otherwise. Every day babies are born who are maimed or made blind and whose right to clean blood has been destroyed by venereal diseases.*

\*   \*   \*   \*   \*

*Seven hundred and seventy thousand boys reach the age of twenty-one years every year in the United States. Before they reach the age of thirty, sixty per cent of them or over 450,000 will have contracted gonorrhea or syphilis or maybe both. Thus is youth tainted because of ignorance and false modesty.*

\*   \*   \*   \*   \*

*Mock Modesty is a social disease more deadly than any disease known. It places a premium on ignorance and condemns measures which, if put into practice, would guarantee knowledge of self to the growing youth and girl which would make them more wholesome. Mock modest persons are usually nasty-minded and are unfit to train children.*









# TABLE OF CONTENTS

CHAPTER I	PAGE
REPRODUCTION AND THE REPRODUCTIVE ORGANS	
REPRODUCTION IN GENERAL. THE MALE REPRODUCTIVE ORGANS: Penis; Scrotum; Testicle; Spermatozoa; Prostate Gland; Cowper's Glands. THE FEMALE REPRODUCTIVE ORGANS: Labia Majora and Minora; Vagina; Womb; Oviducts; Egg-Glands; Ova or Eggs. SECONDARY SEXUAL ORGANS OF THE FEMALE: The Breasts; The Hymen; The Vulvo-Vaginal Glands.....	1
CHAPTER II	
PHYSIOLOGY AND PSYCHOLOGY OF THE REPRODUCTIVE ORGANS	
EROTOGENOUS ZONES; SEXUAL CRAVING, URGE, LIBIDO; COMPARATIVE SEXUAL DESIRES; SEXUAL ABERRATIONS: Satyriasis; Nymphomania; Sadism; Masochism; Exhibitionists; Fetichism; Sexual Perversion .....	22
CHAPTER III	
PUBERTY	
PUBERTY; THE PROCESS OF MENSTRUATION; THE MENSTRUAL DISCHARGE; CHLOROSIS; SEMINAL EMISSIONS.....	28
CHAPTER IV	
CONTINENCE	
CONTINENCE IN GENERAL: THE PROBLEM OF CONTINENCE; BLOCH'S VIEWS ON ABSTINENCE.....	42
CHAPTER V	
MASTURBATION	
IN THE MALE; IN THE FEMALE; THE HABIT OF MASTURBATION; Wrong Behavior of Parents; Prevention of the Habit; Mental or Psychic Masturbation; THE PSYCHOLOGY: Sexual Tension; THE PATHOLOGY: Traumatic Suggestion; Fanatical Over-Moralizing; ETHICAL CONSIDERATIONS.....	62

CHAPTER VI

IMPOTENCE AND STERILITY

IMPOTENCE: CAUSES OF IMPOTENCE, Masturbation; Pollutions; Pros-  
tatic and Urethral Congestion; Gonorrhea; Stricture; Organic  
Causes; Age; Sexual Excess; Sexual Abstinence; Coitus Inter-  
ruptus; Worry; Fright; Intellectual Pursuits; Intense Desire.  
STERILITY ..... 88

CHAPTER VII

SEX—EUGENICS—HEREDITY

SEX: Advantages of Sexual Reproduction; Proportion of Sexes.  
EUGENICS: Meaning of Eugenics; Examples. HEREDITY: Mean-  
ing of Heredity; Theories of Heredity; Mendelism..... 96

CHAPTER VIII

HOW TO LOVE

LOVE AND LIFE; THE IMPULSE TO LOVE; MASCULINE STANDARDS;  
THE ART OF UNDERSTANDING; FREEDOM OF CHOICE; WHY LIVES  
ARE WRECKED; WHEN MEN LOVE; THE STRESS OF COURTSHIP;  
CONJUGAL HARMONY; MARRIAGE AS AN ART; QUICKSANDS OF  
MARRIED LIFE; DESTINY OF WOMEN..... 101

CHAPTER IX

MARRIAGE

A SHORT HISTORY OF MARRIAGE; Promiscuity, Polygamy and Poly-  
andry; Monogamy. WHO SHOULD MARRY. WHO MAY NOT  
MARRY. NO MARRIAGE LICENSE WITHOUT A CERTIFICATE OF  
FREEDOM FROM TRANSMISSIBLE DISEASE. Illustrative Cases..... 122

CHAPTER X

BIRTH CONTROL

EXAMPLES; ARE BIRTH CONTROL METHODS INJURIOUS? VOLUNTARY  
MOTHERHOOD; BIRTH CONTROL OR ABORTION; ROBERT INGERSOLL  
ON BIRTH CONTROL; WHICH IS THE BETTER WAY? VOLUNTARY  
PARENTHOOD LEAGUE..... 140

## TABLE OF CONTENTS

xxiii

### CHAPTER XI

PAGE

#### THE LIMITATION OF OFFSPRING BY THE PREVENTION OF CONCEPTION

PREVENTION OF CONCEPTION; THE SPECTOR OF TOO MANY CHILDREN; THE ORTHODOX REMEDIES; THE RACE SUICIDE BUGBEAR; THE CAUSE FOR ALARM LIES ELSEWHERE; IT WILL LEAD TO IMMORALITY; IT PRODUCES STERILITY; IT IS NOT ABSOLUTELY SURE; WOULD LEAD TO EXCESS IN MARRIED LIFE; IT IS AGAINST RELIGION; IT IS IMMORAL; IT LEADS TO DIVORCE; CHILDREN SUPPORT THEIR PARENTS IN THEIR OLD AGE; THE MORAL STANDARD OF THOSE WHO ADVOCATE THE USE OF PREVENTIVES; WOULD ENCOURAGE EARLY MARRIAGE; WOULD DIMINISH VENEREAL DISEASE AMONG THE MARRIED; EXHAUSTS THE WOMAN'S BODY; KILLS THE WOMAN'S SPIRIT; NEURASTHENIA FROM IMPROPER METHODS; LARGELY RESPONSIBLE FOR THE ABORTION EVIL; WOULD DIMINISH PROSTITUTION IN MARRIED LIFE; THE ENORMOUS BENEFITS FROM THE EUGENIC STANDPOINT; A FEW EVERYDAY CASES.....	163
---	-----

### CHAPTER XII

#### SEX FACTS FOR THE MALE

CIRCUMCISION; SEX ALARMS: Herpes, Varicocele; Hydrocele; Urethrorrhea; Prostatorrhea; Spermatorrhea; Venereal Warts; "Lost Manhood".....	188
--	-----

### CHAPTER XIII

ADVICE TO GIRLS APPROACHING THE THRESHOLD OF WOMANHOOD .....	193
--	-----

### CHAPTER XIV

#### SEX FACTS FOR THE MARRIED

THE BEST TIME FOR MARRIAGE; THE WEDDING NIGHT; COITUS NOT FOR PROCREATION; FREQUENCY OF COITUS; EXCESS; COITUS DURING MENSTRUATION; COITUS DURING PREGNANCY; DYSPAREUNIA; VAGINISMUS; FRIGIDITY (SEXUAL ANESTHESIA); ONANISM; COITUS RESERVATUS; INJURIES DURING COITUS.....	199
--	-----

### CHAPTER XV

#### SEX IMMORALITY

AN ARGUMENT IN DEFENSE OF THE SINGLE STANDARD OF SEXUAL MORALS .....	211
--	-----

## CHAPTER XVI

PAGE

## MENOPAUSE

AGE OF OCCURRENCE; SYMPTOMS; COMPLICATIONS; HYGIENE, EXERCISE,  
BATHS, FOOD, PREVENTION OF CONSTIPATION..... 218

## CHAPTER XVII

## PREGNANCY

DEVELOPMENT OF THE OVUM; SIGNS OF PREGNANCY: Probable; Direct;  
DURATION; MISCARRIAGES; CARE DURING PREGNANCY; DISORDERS  
DURING PREGNANCY; MULTIPLE BIRTHS; OUTFIT FOR CHILDBIRTH;  
MATERNAL IMPRESSIONS..... 230

## CHAPTER XVIII

## ABORTION

SERIOUSNESS; INDICATIONS FOR; RESULTS; THE QUESTION OF ABORTION;  
CONCLUSIONS REGARDING..... 249

## CHAPTER XIX

## SYPHILIS

HISTORY; MANNER OF INFECTION; COURSE OF DISEASE; Preparatory  
Stage; Primary Stage; Secondary Stage; Tertiary Stage; Heredi-  
tary Syphilis; FREQUENCY AND PREVENTION; RECOGNITION; TREAT-  
MENT; CONSEQUENCES; SYPHILIS A PROBLEM OF THE NATIONS;  
SYPHILIS AND OTHER DISEASES; Innocent Contagion in Women;  
Syphilis and Marriage; Children and the Heredity Factor; Heredi-  
tary Symptoms in Children; Nurses and Infants; PREVALENCE  
OF SYPHILIS; INCIDENCE IN VARIOUS LOCALITIES; MARRIAGE AND  
SYPHILIS; The Danger of Locomotor Ataxia and Paresis; A FEW  
FACTS ABOUT SYPHILIS; PERSONAL ADVICE..... 272

## CHAPTER XX

## GONORRHEA AND THE OTHER VENEREAL DISEASES

GONORRHEA: HISTORY; CAUSE AND RECOGNITION OF DISEASE; MAN-  
NER OF INFECTION; COURSE OF DISEASE; FREQUENCY AND PRE-  
VENTION; TREATMENT; CONSEQUENCES OF THE DISEASE; A. CORBETT  
SMITH ON GONORRHEA; OPHTHALMIA; MARRIAGE AND GONORRHEA;  
When May a Man Who Had Gonorrhea Get Married; When  
May a Woman Who Once Had Gonorrhea be Permitted to  
Marry? The Question of Probable Sterility; A FEW FACTS ABOUT  
GONORRHEA; PERSONAL ADVICE. OTHER VENEREAL DISEASES:  
"Soft Sore" or Chancroid; Balanitis. INFECTING THE INNOCENT  
ONES ..... 317



## CHAPTER XXI

PAGE

## PROSTITUTION AND SEGREGATION

History; Causes Underlying Prostitution; Measures of Prevention; Medical Inspection; Segregation; Arguments for and Against....	339
--	-----

## CHAPTER XXII

## QUACKS AND THEIR METHODS

QUACK'S AID TELLS OF HORROR CHAMBERS; MAKES A "DOCTOR" IN FOUR SECONDS; QUACK'S MANAGER TELLS HOW SICK DUPES ARE RUINED; FORMER INTERPRETER FOR QUACKS MAKES CONFESSIONS OF THE SYSTEM USED; ANOTHER FORMER FLOOR MAN'S STORY; DR. ISAAC WALTER HODGENS—HE TELLS HIS PERFECTLY HEALTHY CALLER HE HAS PROSTATITIS AND WANTS \$35 FOR TREATMENT; OLD DOCTOR SWEANY CO.; DR. MAC CANDLESS DISCOVERS VARI- COECLE AND WANTS \$50 FOR AN OPERATION; LETTERS FROM VIC- TIMS; PIMPLES; "LOST MANHOOD" .....	346
--	-----

## CHAPTER XXIII

## MODESTY AND PRUDERY

MODESTY; PRUDERY.....	363
-----------------------	-----

## CHAPTER XXIV

THE BURIED LIFE.....	366
----------------------	-----

## CHAPTER XXV

## SEX EDUCATION AT HOME AND IN SCHOOL

AT HOME; IN SCHOOL; The School Teacher and Sex Education; IN HIGH SCHOOL; Outline of Course, Opinions of Pupils as to Utility; Evidence of Judge Julian W. Mack.....	371
--	-----

## CHAPTER XXVI

## THE WONDERFUL STORY OF LIFE

A MOTHER'S TALKS WITH HER DAUGHTER REGARDING LIFE AND ITS REPRODUCTION .....	392
---	-----



## CHAPTER XXVII

## MARRIAGE A PROFESSION

PAGE

The Institution of Marriage; The Maternal Instinct; Another Example; Faulty Physiology and Marriage; The Criminal Lack of Preparation for Marriage; Advice to Wives and Prospective Wives; Courtship After Marriage; Wife's Behavior Toward Marital Relations; Cleanliness; Daintiness; Dainty Underwear; Do Not Offend Against Esthetics; Obesity and a High Stomach; Bad Odor from the Mouth; Odors from Other Parts of Body; Leucorrhea; Loyalty; The Hygiene of Marriage; Advice to Husbands and Prospective Husbands; Venereal Disease and Matrimony; The Bridal Night; Frequency; Continence in Marriage; Single or Separate Beds.....	404
--	-----

## CHAPTER XXVIII

## IF EVERY MAN WERE STRAIGHT

There Would Be No Masturbation; No Prostitution; No Illegitimate Children; No Venereal Disease; Fewer Childless Homes; Fewer Mental Defectives and Insane; No Locomotor Ataxia; Length of Life About One-third Longer; Earning Capacity Greater; Industrial Life Richer; Untold Misery and Suffering Ended....	427
--	-----

## CHAPTER XXIX

THE DOUBLE STANDARD.....	437
--------------------------	-----

## CHAPTER XXX

THE WAY TO HER HOUSE.....	444
---------------------------	-----

## CHAPTER XXXI

THE HOUSE OF SECRECY.....	450
---------------------------	-----

## CHAPTER XXXII

## THE PROBLEM OF SEXUAL HYGIENE

Importance of Subject; Teaching in School; Requirement for Teaching of; Necessity for Educations of Parents Also; No Reason for Undue Haste.....	459
--	-----

## PART II

## SEX SEARCHLIGHTS

AN ANTHOLOGY OF SEX KNOWLEDGE embracing quotations from noted sexologists, physicians, clergymen, educators, attorneys, social reformers, representative journals and official utterances of State Boards of Health.....	469
--	-----

## PART III

## SEX TRAGEDIES

INTRODUCTION. THE STORY OF ROSE AND EDWARD. THE CASE OF IRENE LARRABEE WEST. A LOST LEADER. ONE OF LIFE'S LITTLE DRAMAS. WHO WOULD BLAME HER—WOULD YOU? THE CASE OF MARY BROWN. A LETTER TO A GOD-SON. THE CASE OF ED AND BESS. THE STORY OF BETTY AND BOB. THE CASE OF THE MARTINS.....	625
--	-----

## PART IV

## SELECTED POEMS, GLOSSARY AND BIBLIOGRAPHY

WILD OATS. THE PRICE HE PAID. FIVE DOLLARS A WEEK. THE WOMEN WHO WALK. THE UNDERWORLD. NO ONE HAD TOLD HER. THE WORN OUT WOMAN. THE HARLOT AND THE NUN. DOWN AT THE CORNER. SONG OF THE LAYETTE. WHERE DID THE BABY COME FROM? A WOMAN'S ANSWER. C. L. M. WHAT OF THE PRODIGAL GIRL? A MOTHER TO A SON. SYPHILIS. FENCE OR AMBULANCE.....	699
GLOSSARY .....	720
BIBLIOGRAPHY .....	739
INDEX .....	755



SEX SEARCHLIGHTS  
AND  
SANE SEX ETHICS





# SEX SEARCHLIGHTS AND SANE SEX ETHICS

---

## CHAPTER I

### REPRODUCTION AND THE REPRODUCTIVE ORGANS

#### REPRODUCTION IN GENERAL

THE lowest forms of animal life while very small bits of jelly-like material, something like the white of an egg, go through the same stages of existence as do the highest forms—growth, reproduction and death. Their structure, however, shows no special organs. Thus the *Ameba* is an animalcule from fresh water which is capable of enclosing food particles at any point of its circumference, and when these have been digested as far as possible, of casting them out again from any portion of the body which happens to be most convenient.

As we ascend in the scale organs make their appearance, and it is important to note that the first two sets to be distinguished are those for digestion and for reproduction. Going still higher we find bones, muscles, blood vessels and nerves gradually coming into use, all of which it will be observed are for the purpose of rendering it more easy for the possessor to obtain a supply of food, as well as utilizing it when obtained.

From the standpoint of the individual, the digestive system is the most important, but the reproductive from the standpoint of the species. It is interesting to recall some of the examples showing the need there is for the species to be perpetuated: Tapeworms being nourished by the juices of the animal in which they live have no use for any elaborate digestive apparatus. The reproductive organs, on the contrary, are thoroughly developed, the ripe joints are practically nothing but the repro-

ductive organs stuffed with eggs, and it has been estimated that a tapeworm will throw off about 1500 pieces during its life, each of these containing about 53,000 eggs. The queens of the white ants of Africa are mere machines, swollen with eggs which they discharge at the rate of 60 a minute, their food being brought to them by the workers. Our May-flies which live in the perfect winged state but a few hours, not over a day or two, have their mouth so imperfect they cannot absorb any nourishment, yet they blithely lay eggs in the water, and these ultimately develop into swarms which in some years obscure the street lights and have to be swept up in heaps.

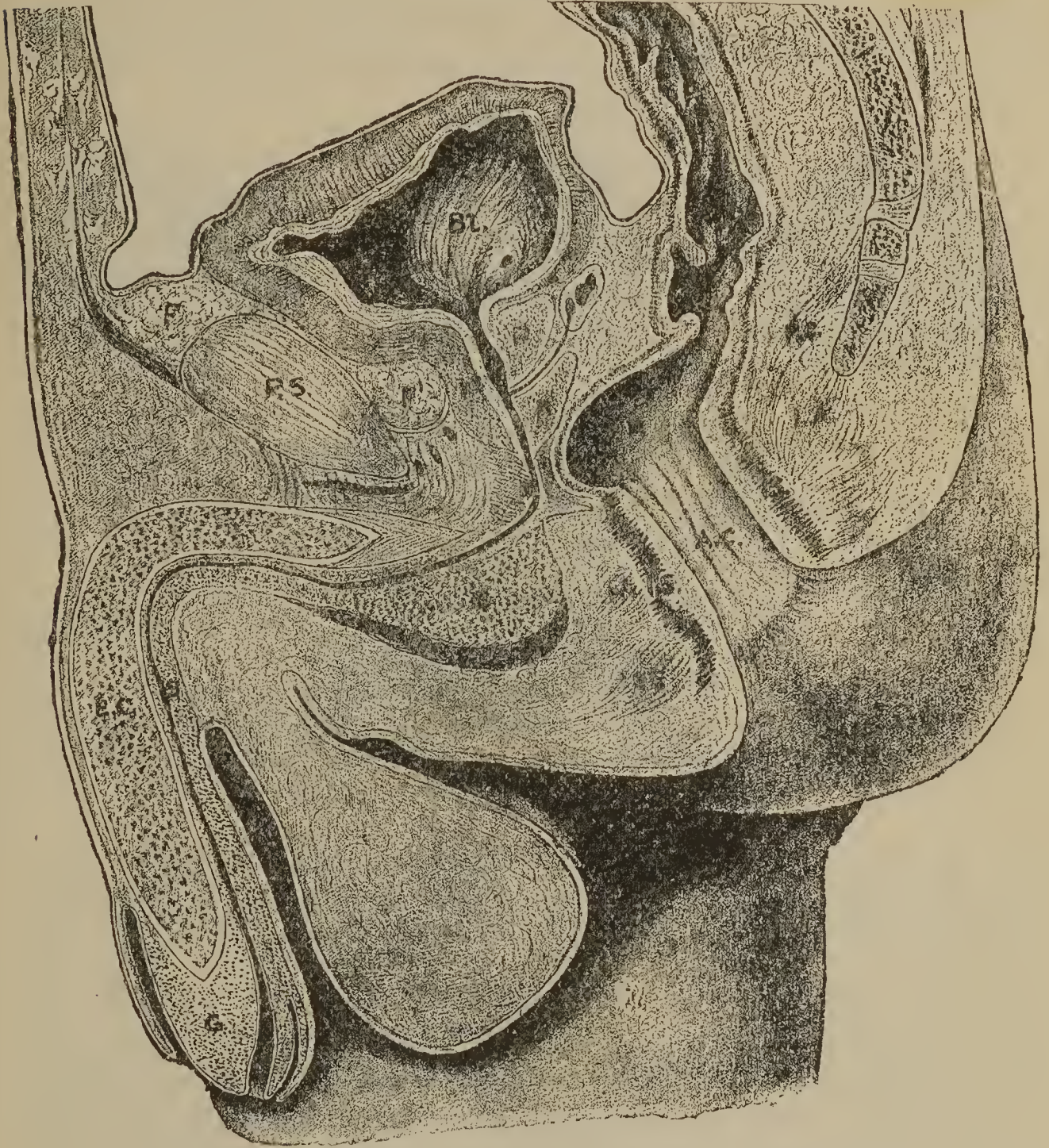
Among the animals without a backbone, on many occasions we find an approach to the sexual congress of the higher forms. Thus dragonflies soar about for hours clinging to each other. In the class of insects, the male usually dies in a short time, for example, when the queen-bee takes her wedding-flight, the drone-bee which accompanies her, loses his genital organs as a result of the connection and soon succumbs to his wounds. The female spider is much larger than the male, and compared to human beings has been likened to a giantess 70 to 80 feet tall and 100 tons in weight, with a man of ordinary height, 6 feet, and weighing 150 or 160 pounds. After the connection she has an unfortunate tendency to fall on her mate and devour him, which he often escapes by his smaller size and quicker movements.

Rising in the animal scale, we find most fishes merely lying side-by-side, and as the eggs are discharged by the female, the milt deposited by the male at the same time or soon after, fertilizes them. A few have "claspers" on the male by which the sexes are held together during the laying of the eggs. Frogs as well adhere tightly during the breeding season, as everyone knows who has tried to separate them at this time. Thus the relation has been getting more and more intimate, in birds, real contact between the sexes being necessary, and some species being actually provided with a rude sort of male organ, as in the ostrich and ducks. Hence the male sperms may reach the eggs just after they have been laid, as with fish; or just at the time they are laid, as with frogs and toads; or within the female's body, as with birds and lizards, and the other type of reptiles.

When we come to the highest class of backboned animals



to which we belong—or the mammals—a true sexual intercourse is necessary for the active male element and the passive female element to be able to unite, and fertilization occur.



LOWER PART OF BODY OF ADULT MAN, DIVIDED IN MIDLINE

F, F, fat. P. S., pubic bone. Bl., bladder. P, P, prostate gland. R, rectum. A. C., lower opening of bowel. C. C., body of penis ending in—G, the tip (or glans) surrounded by foreskin. E. S., I. S., L. A., R. C., muscles. (Just back of penis and not lettered is the scrotum.)

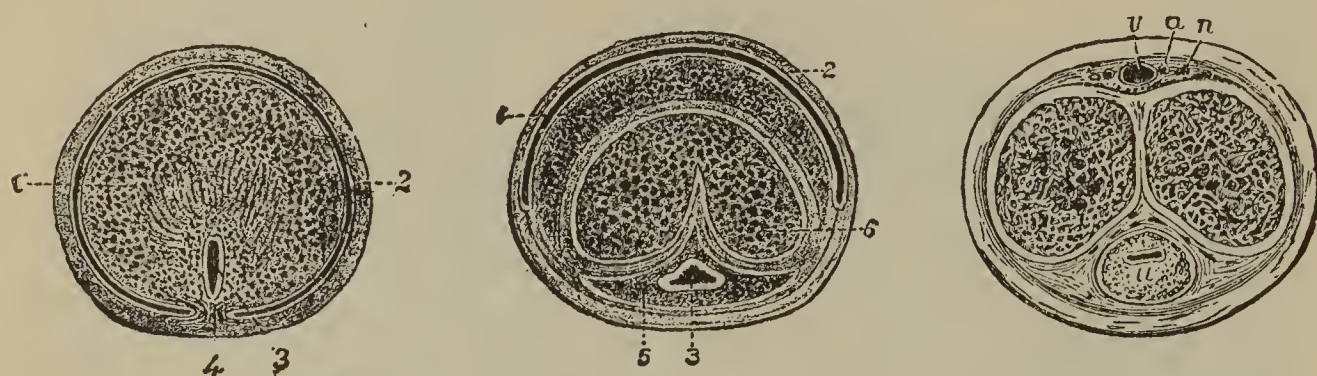
#### THE MALE REPRODUCTIVE ORGANS

One of the most striking differences between the two sexes is that while the female organs of reproduction are mostly inside and hidden, those of the male are in great part exposed.



Beginning then with the external organs of the male, we find a rod-like appendage—the copulatory organ—or penis, and a bag or pouch enclosing two rather firm masses (testicles).

In Latin penis means “a tail,” therefore, except when ready for intercourse, the organ hangs down tail-like. It is made up of two cylinders of flesh, side-by-side above, and attached at



(LEFT) PENIS CUT ACROSS ONE-HALF INCH BEHIND OUTER OPENING OF URINARY CHANNEL

1, end of organ (glans). 2, foreskin. 3, channel for urine. 4, point where foreskin is attached.

(MIDDLE) PENIS CUT ACROSS THREE-EIGHTHS INCH FARTHER BACK

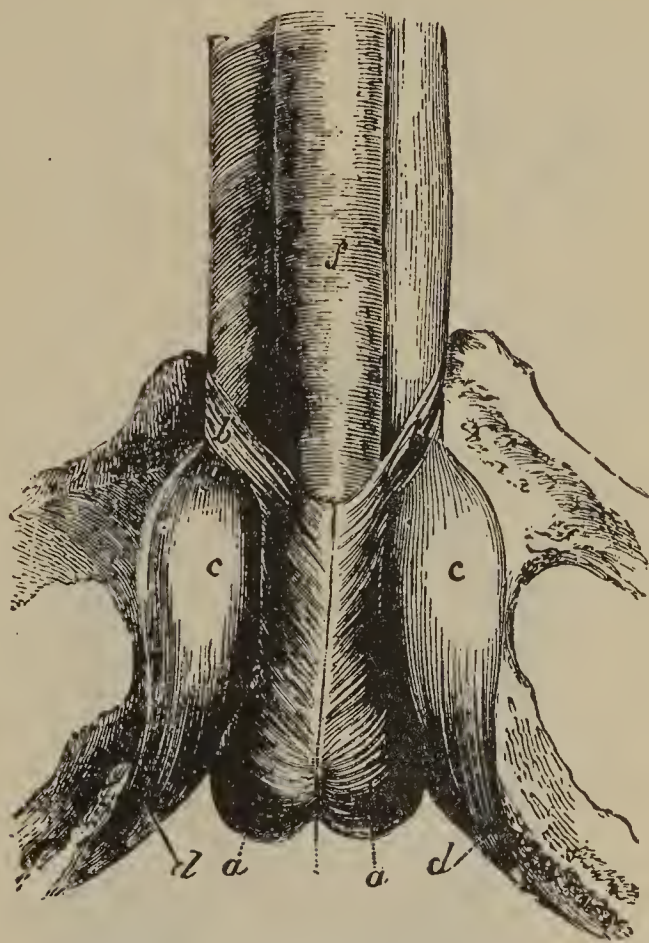
1, 2, 3, as in previous picture. 4, inner covering. 5, 6, the three cylinders of which the organ is composed.

(RIGHT) PENIS CUT ACROSS ABOUT THE MIDDLE OF ITS LENGTH

The skin covering (not lettered) on outside, a cylinder on each side, and the third surrounding the urethra (u) is below. Just under skin is a large vein (v) with an artery (a) and nerve (n) on each side.

the near end to the bone, below there is another cylinder in the groove between the upper ones, but this one is hollow and through it runs the channel from the bladder for the urine; at the free end this hollow cylinder enlarges into a sort of cap, shaped something like an acorn, and the opening by which the urine periodically and the seed at times escapes is in the middle of this cap. All three cylinders are covered by the skin which continues on down from the lower belly, this returning to the body forms the purse to be described. On reaching the end of the penis, the skin covering is pleated so it surrounds the end of the organ more or less completely, and this pleated part is the foreskin. The size of the penis as a whole is no token whatsoever of the sexual capacity of its possessor. In some of the lower animals, as the dog, rigidity necessary for penetration during intercourse is furnished by a small bone in the middle part of the organ, but in human males, the hard condi-

tion is set up by the blood being dammed up. First of all an impression is sent from the brain, this acts on the nerves so a muscle at the body end of the penis is set in action and tightens up causing blood to collect, and shortly the whole mass becomes very firm, larger and raises up.



ROOT OF PENIS

*c, c,* showing how it is attached to bones. *a, a, b, b, d, d,* muscles. *f,* lowest cylinder of penis through which the urinary channel runs. *e,* recess between muscles.

Hanging down between the penis and the body is the purse (scrotum) surrounding the “stones,” as they are termed in the Bible, or the testicles. These are the male organs strictly so-called, when they are removed in childhood remarkable changes are produced, the individual grows up to be neither a man nor a woman, but a neuter—about half-way between; removal of the penis, on the other hand, has no effect. The testicles, then, are what make up the male sex, both for man and animals, and are the notorious “interstitial glands,” we have been reading so much about in the newspapers lately. With the organs of like nature (ovaries) in the opposite sex, they are often called “the gonads.”

Each “stone” (testicle) is about  $1\frac{1}{4}$  inches long and wide,



and nearly as thick. Through the skin of the bag covering them they feel like small masses of solid flesh, but were one to be cut open it would be found composed of a dozen or more little boxes as it were, each of the boxes contains an immense num-



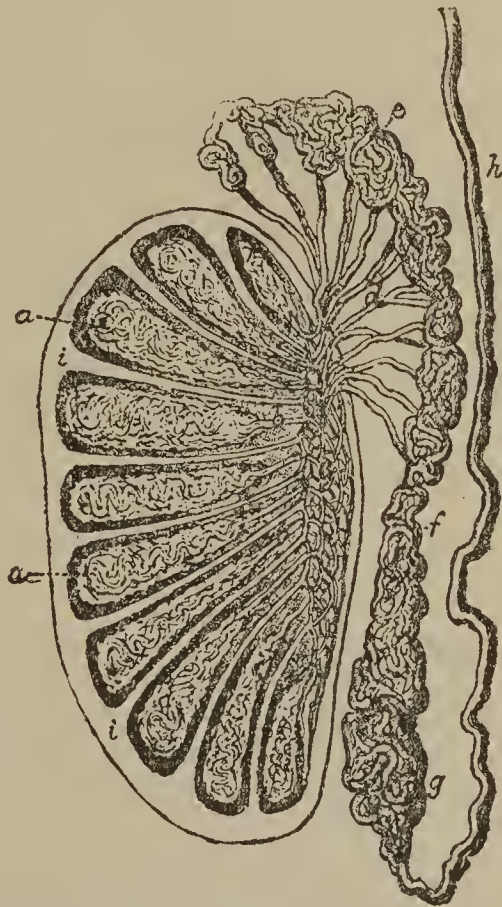
THE LEFT TESTICLE AND ITS COVERINGS OPENED ON OUTER SIDE

*p, p*, covering. *t*, testicle. *e*, its cap (epididymis). *vd*, canal by which seminal fluid escapes from testicle. *h*, appendage of testicle. *G*, some of the tubes from testicle, enlarged about 10 times.

ber of excessively minute tubes, these are so small it is estimated their entire length is over 2,000 feet. On top of each testicle and at its back part is a cap (epididymis). All the tubes go to the cap and gradually come together at the discharge-pipe (vas deferens), about 18 inches long which takes a roundabout course, running up and entering the belly by an opening by which rupture often occurs, it curves on itself, then turns down to bottom of the bladder on outside finally emptying into the urinary channel.

There is a free supply of nerves to each testicle, as every one knows who has experienced the sickening pain caused by a blow or kick on these parts. Vomiting and even unconsciousness may be set up by such violence.

Nature has made an effort to lessen the chances of blows, etc., by placing the testicles on a different level, they are thus able to glide past each other occasionally, without damage. An English surgeon (Corner), examined a large number of children, and found at birth the testicles were approximately level. With growth the proportion in which the right testicle is lower



THE TESTICLE DIVIDED FROM ABOVE DOWN

*i, i*, partitions. *a, a*, collection of tubes in the various compartments, these finally join (*e, f, g,*) and form *h*, the canal from the testicle.

decreases from 39 to 10, while that in which the left is lower increases from 41 to 80; becoming more marked after the age of 15 (when the genitalia grow at puberty) than it was before.

The testicles form two of the many "glands" in our bodies. Now by this is meant a greater or lesser portion of the body structure set apart for a special purpose. The liver is a huge gland, the lachrymal glands make the tears, the salivary glands the saliva (spittle), the sweat glands of the skin, the perspiration, and so on. The testicle makes two kinds of fluid—the external and internal secretions. Of these the first is con-

cerned with the perpetuation of the species, and called the "seed" (semen, seminal fluid), is made up of little sperm-animals (spermatozoa) in incredible numbers in a thick fluid something like glycerin. To show the remarkable number, it may be said the estimate for the total number discharged at a single time is about 225 millions, the lowest zero, and the highest over 500 millions. To measure minute objects seen under the microscope, the *mikron* is employed, this is but the  $1/1000$



(LEFT) HUMAN SPERMATOZOA (GREATLY ENLARGED)

1, in profile, the tail not shown. 2, viewed on the flat; *b*, head; *c*, middle piece; *d*, tail; *e*, end-piece of the tail.

(RIGHT) MALE GERMS OF HUMAN LIFE (SPERMATOZOA). ENLARGED 800 TIMES

part of a millimeter—which itself it will be remembered is only  $1/25$  inch long. These sperm-animals, first seen in 1677, are about 60 of such mikrons in length, and consist of a head and a tail. The head is the important part for fertilization though only one-eighth of the whole, but the tails makes the lashing movements by which they are propelled at about the rate of an inch in 7 or 8 minutes. The shape of the sperm-animals fits them well for traveling along crooked passages and through membranes, under the microscope they can be seen to make their way around small obstacles in their path.

*Internal*—secretions or—fluids do not escape from the body, but are used up inside it, for various purposes, and of the several organs by which they are manufactured, the testicles are by no means the least important. As a matter of fact,



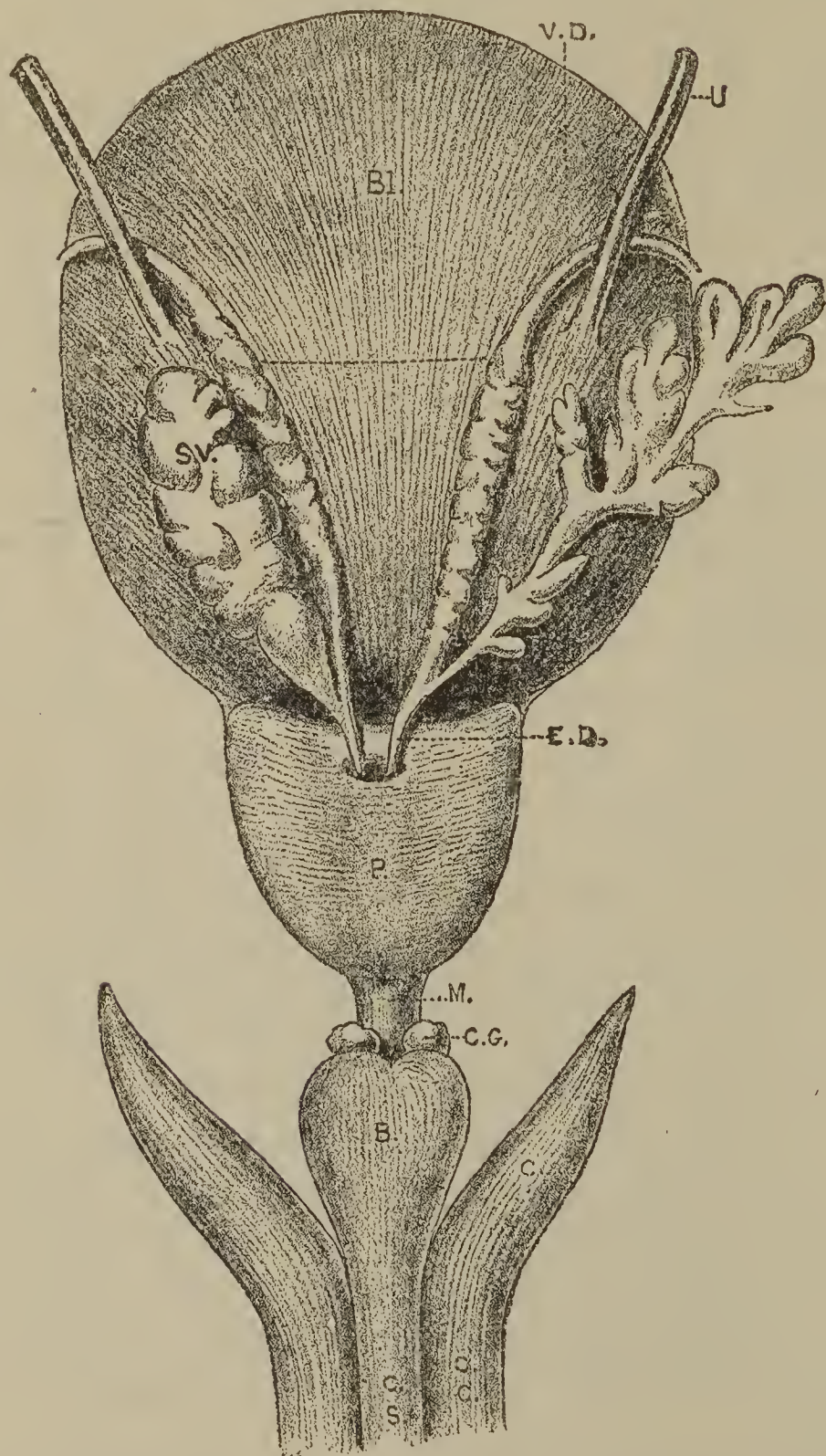
manhood or virility depends on this internal juice sent out by the testicles. Muscles are at work only for a few of the waking hours while the sex-glands; like the heart, work practically all the time, even during sleep. The juice or secretion is sent out through the blood, and reaching the brain, nerves and muscles, gives them power, strength and tone respectively.

Before the child is born the testicles are situated high up in the body just under the kidneys, as time goes on they come lower and lower, and just before birth they escape into the pouch where they are to stay during the rest of life. In some animals they always remain inside the body, in others they come down during the breeding season—either under the skin or into a pouch like that of mankind, and go back in a short time. The same thing may happen in mankind, the testicle may not come down at all, one or both may stop anywhere on the way, sometimes just under the skin of the groin where it is a great nuisance, being very tender when pressed on by the clothing. Of late years it is possible to overcome this displacement by a slight operation, which is especially necessary as it has been found that the displaced gland is liable to develop cancer. Montaigne the famous essayist tells of an individual who had always dressed in woman's clothes, being thought to be a female, but one day jumping over a ditch both testicles came down. This may have been a genuine case of displacement, or the gossipy old Frenchman may have been imposed on by some countryman given to drawing the long bow.

The testicle on the left side generally hangs a little lower than its mate, simply because the "cord" which holds it up and is composed of the discharge-pipe and blood vessels with many nerves, is somewhat longer on that side. This is perfectly natural and not a sign of "lost manhood" or other terrible disease with which quacks are accustomed to frighten their youthful patients.

As the semen is formed it is carried by the discharge-pipe of each side to a reservoir underneath the bladder and between it and the lower bowel, and stored here until the time for discharge when it escapes by a short tube into the urinary channel, and on out of the body. Around the channel where the short tube enters it is a rather firm mass, the prostate gland, the juice from this is discharged during intercourse, and being

watery serves to dilute the thick semen and aid its escape. The make-up of this gland is the same in some respects, as that of the womb in the female, and it is sometimes called the "male

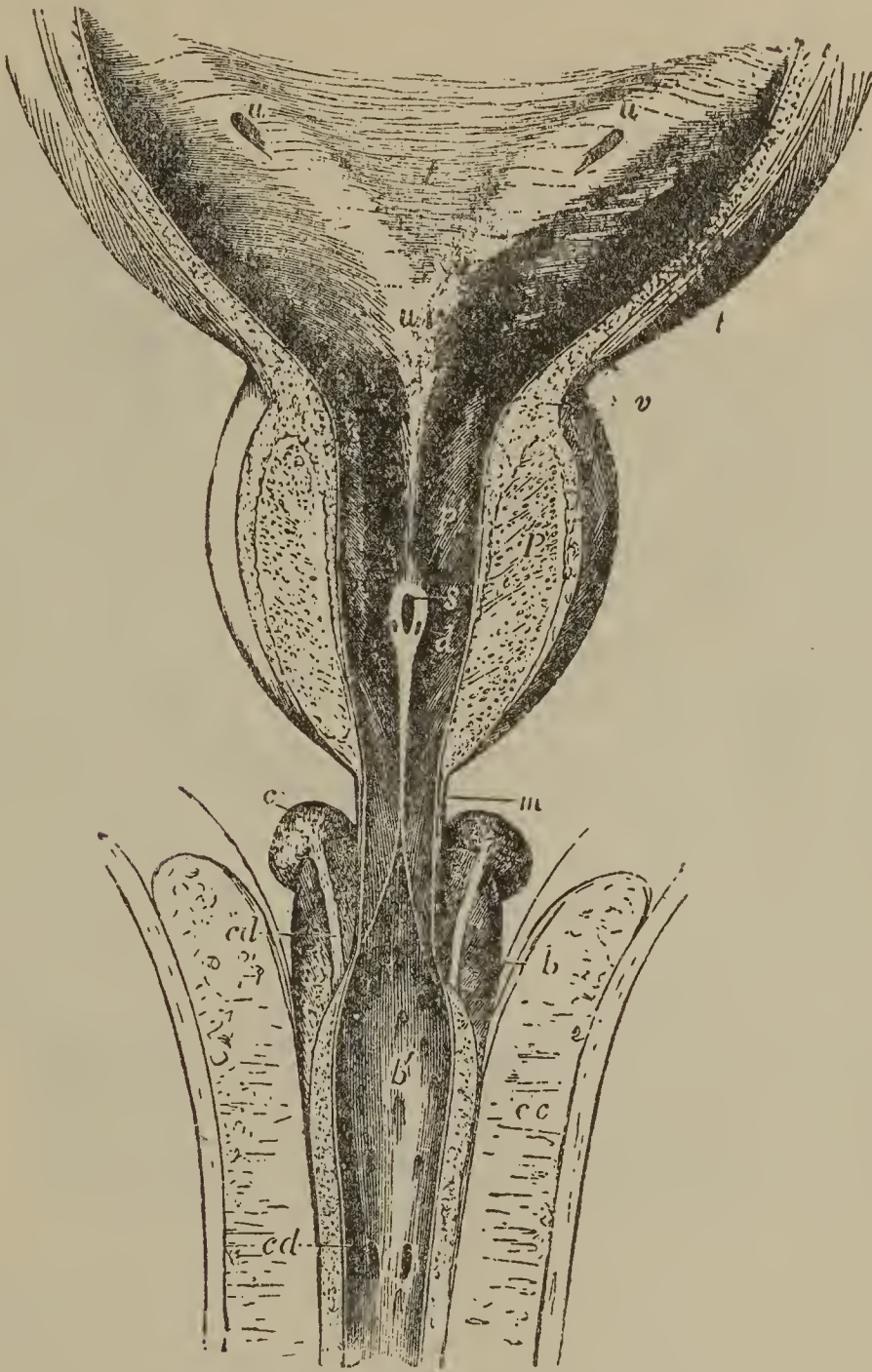


NECK OF THE BLADDER, PROSTATE, ETC. IN THE MALE FROM BELOW

Bl., bladder covered by lining of the abdomen (peritoneum), as far down as the dotted line. S. V., left seminal vesicle (the right one has been unravelled). E. D., passage from seminal vesicle into urinary canal. V. D., canal from testicle. P, prostate gland. M, beginning of urinary canal. C. G., Cowper's gland. B, C, root of penis. C. C., one of the three cylindric masses making up the penis. C. S., another mass through which the urinary canal runs. U, the tube by which the urine is brought from the kidney to the bladder.



uterus." In some elderly men it gives rise to much difficulty in passing water as it grows larger, and being located at the lower part of the bladder, may prove a great obstacle to the egress of urine. Finally, beneath the prostate on each side is



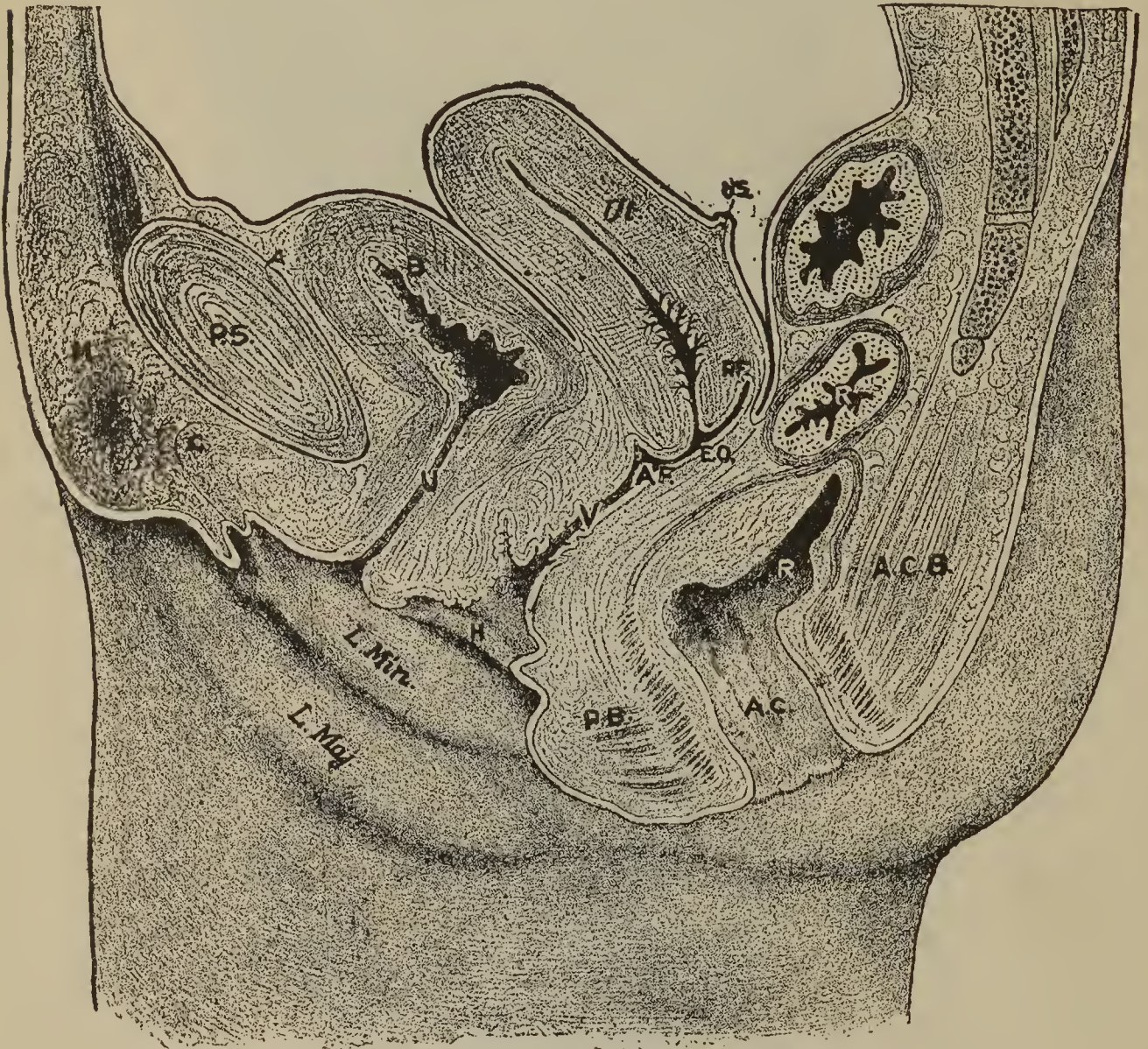
NECK OF THE BLADDER, PROSTATE, ETC. FROM ABOVE

*u, u*, opening into bladder of tubes from kidneys. *u, v*, end of ridge on which *u, u*, open. *s, v*, muscle closing bladder. *p*, prostate gland. *p¹*, beginning of the urinary channel. *s, d*, opening for seminal fluid. *m*, unprotected part of urinary channel. *c*, Cowper's gland with its opening (*cd*) and the part of the urinary channel (*b*) where the openings are located. *cc*, the cylinder of left side covered by skin.

a little, round body (Cowper's gland), the juice from which is also poured out at intercourse, and being alkaline clears up the urinary canal which has been left acid since the last passage of



the urine. The spermatozoa are quickly killed by contact with acids, and to ensure they escape from the body alive, the acid is checked as just stated. Moreover, these little bodies and some others form admirable hiding places for the germs of gonorrhea as we shall see later. So much for the male reproductive organs.



LOWER PART OF BODY OF ADULT FEMALE, DIVIDED IN MIDLINE

M, fat. C, clitoris. P. S., pubic bone. B, bladder. U, urinary channel (urethra). Ut., womb; U. S., one of its supports; and E. O., its outer opening. L. Maj., L. Min., greater- and lesser lips. H, maidenhead (hymen). V, birth-canal (vagina), surrounding the womb at its inner ends, A. F. and P. F. P. B., A. C. B., muscles. R, R, R, lower bowel (rectum) opening on surface of body at A. C.

#### THE FEMALE REPRODUCTIVE ORGANS.

As stated previously, the female differs from the male in that her genitalia are mostly within the body and hidden from view. However, while practically outside the cavity of the abdomen, they open into it on each side, as will be shown shortly.

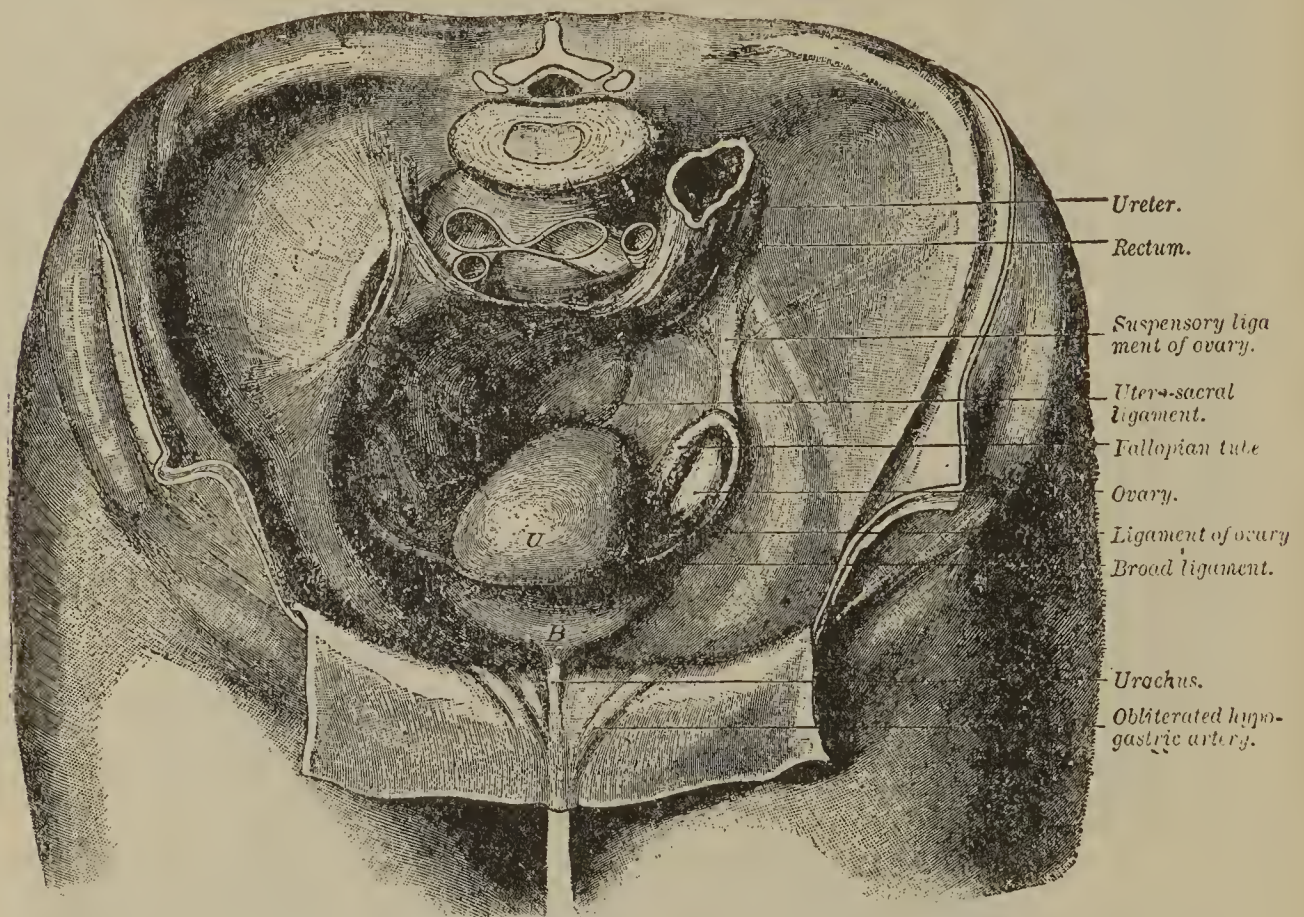


It is the custom to divide the reproductive organs of the female into external and internal, and commencing with the former we find they are made up of a pair of lips on each side. Of these the outer (*labia majora*) are a fold of thick flesh, on right and left respectively, covered with skin externally. Just inside them and attached is a similar but smaller pair (*labia minora*), the inner lips, and on separating these thin lips the entrance to the sexual passage or birth canal (*vagina*) is seen. In young and vigorous women, the outer lips hide the thin inner ones, but in children the inner ones are more prominent because the others are not yet developed. With advancing age as well, and wasting of the body generally, the inner lips once more become noticeable, as in the child. In some of the savages of South Africa, the inner lips grow to enormous size, and hang down 7 or 8 inches, making what is called the "Hottentot apron." From disease a similar condition is occasionally encountered in white women also. Obviously such a state of affairs must cause a great hindrance to sexual connection, it is only possible with the aid of the woman, and it is impossible for them to be raped. In the higher apes the outer lips are small, but the inner ones very large, and this prevails generally in the African negros until it culminates in the long "apron" of some tribes.

Once past the outer and inner lips, the vagina is entered, this means "a sheath," and is the birth canal through which the child travels from the womb where it has grown to the outer world. It is not an open passage like a gaspipe, but the walls are in contact more or less firmly, except when separated by some means, and this is the reason why erection of the male organ is necessary to effect entrance, though after the birth of a child the parts are looser than before. In length the passageway differs considerably, depending among other things on the height of the individual, but an average may be said to be 3 or 4 inches.

The vagina runs up and back, and at its upper end surrounds the free end of the womb (*uterus*), which hangs down into the canal. A Frenchman has defined a woman as "a uterus waited on by other organs," but as a matter of fact, the feminine characteristics depend on the ovaries, as the male ones do on the testicles. The womb is a hollow, muscular mass, in the mid-

line, shaped a good deal like a pear (with the large end up),  $2\frac{1}{2}$  or 3 inches long, about half that in width, and nearly an inch thick. It is amazing to think that from this size, it will during pregnancy and during the short space of 10 lunar months (280 days) grow large enough to hold an 8-, 10-, or even 12- or 15-pound baby with the afterbirth, and "bag of waters." Below it has an opening into the birth canal, and above at each corner,



THE CONTENTS OF THE LOWER ABDOMEN IN THE FEMALE, SEEN FROM ABOVE

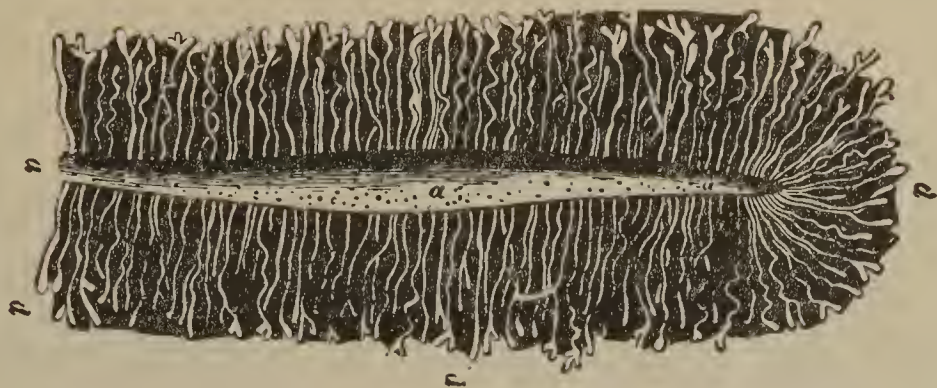
*U*, womb. *B*, bladder.

two more, leading to the tubes by which the eggs come down. From birth to puberty the womb is of little importance, being only partly developed. From puberty to the "change of life" (climacteric), it is on the other hand, of great importance in the life of the individual, especially if she gave birth to children; and in any event the monthly sickness proves it is actively at work. After the change of life it again grows unimportant, its work has been done, and so long as the individual survives is of no further use.

The egg-tubes (Fallopian tubes, oviducts), one on each side, lead from the upper and outer corner of the womb to the egg-gland (ovary). In length they measure about 4 inches, and



it is interesting to find the inner surface is completely covered with excessively fine hairs which are in constant motion, all waving in the same direction as does a field of wheat when the wind blows over it. Now the direction in which they wave is



WOMB CUT THROUGH TO SHOW CENTRAL CAVITY (*a*), AND THE MANY RECESSES (*d*) IN WHICH DISEASE MAY REMAIN

down, so the egg once deposited in the tube continues on, aided by this wavy motion, to the womb. Here if fertilized by the male semen it remains and quickly develops into the child; if not fertilized it keeps up its course and is finally expelled from

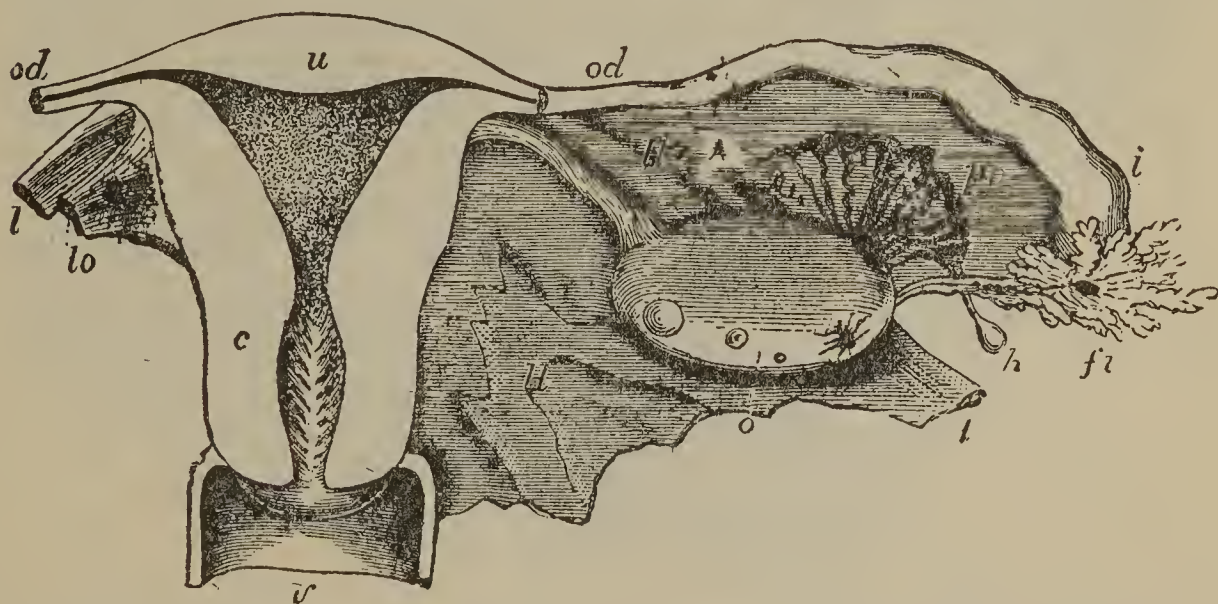


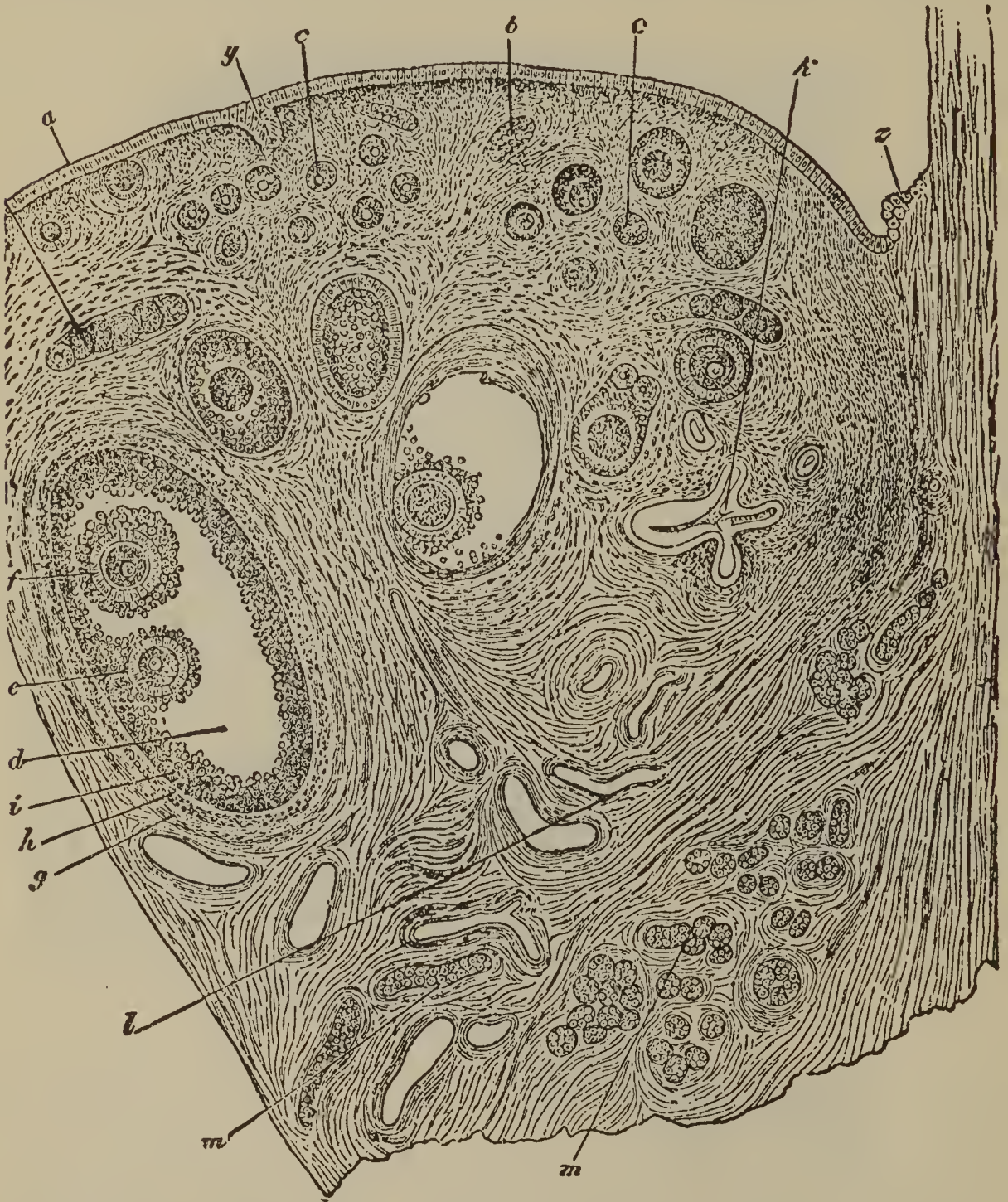
DIAGRAM OF THE WOMB AND ITS APPENDAGES (TWO-THIRDS NATURAL SIZE)

*u*, womb, with its neck, (*c*). *v*, birth-canal. *od*, *od*, oviducts by which the eggs from ovary reach womb. *l*, *l*, *lo*, three of the supports of womb. *i*, dilated end of oviduct with its fringed border (*fi*). *o*, egg-gland (ovary). *po*, cap of ovary. *h*, end of cap.

the body. To prevent the egg going astray the end of each tube near the ovary is large and fringed, and here it is where the female genitals communicate with the belly cavity. (In some of the lower animals, such as the rat, still further precautions are taken, the ovary is in a sac shut off and the only opening is



through the egg-tube.) The latter, the womb itself and the vagina, for all practical purposes are merely subdivisions of the same tube for the egg to travel along. Moreover, the lining is continuous from the mouth of the egg-tube into the abdomen



OVARY (EGG-GLAND) OF FULL-GROWN DOG DIVIDED THROUGH MIDDLE *a*, *y*, *z*, covering. *l*, blood vessels. *m*, *m*, cap of ovary. (The rest of the figures point to eggs in various stages of development. Enlarged fifteen times.)

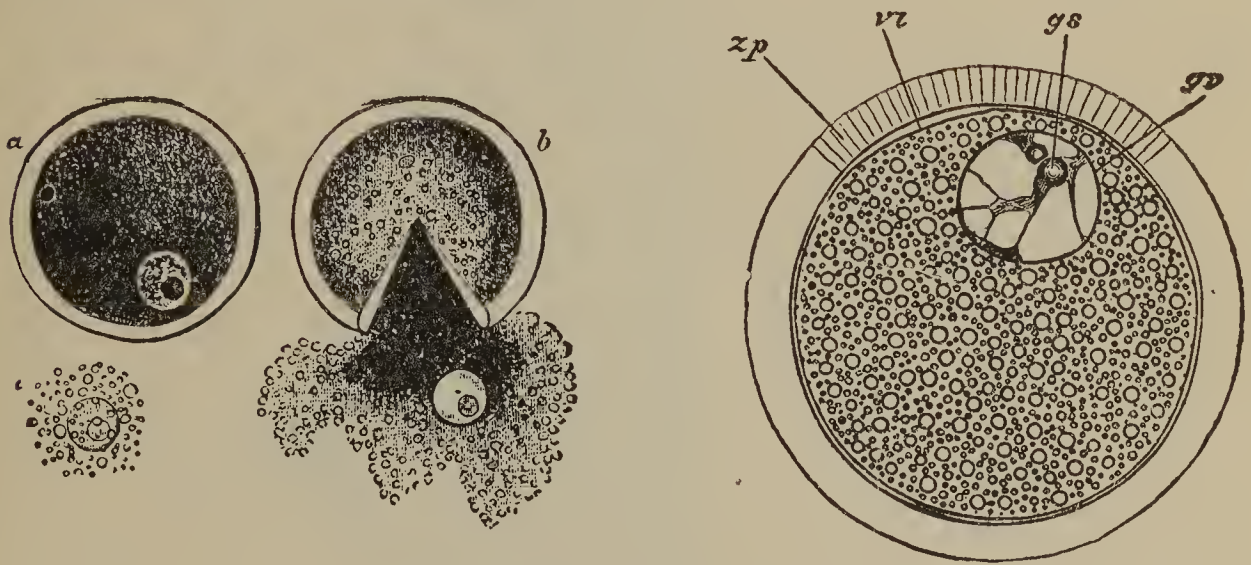
down to the external genital opening where the skin begins, a distance of nearly 12 inches, so disease can travel from one end to the other, slower or faster—according to circumstances.

It now remains to describe the egg-glands or “ovaries,” which are located one on each side of the womb, and are about



the size of an almond with its shell, or  $1\frac{1}{2}$  inches long,  $\frac{3}{4}$  wide and  $\frac{1}{3}$ -inch thick. These egg-glands which correspond to the testicle in the male, like these latter are first formed just below the kidney, but before birth come down, though not so far as the male glands, remaining inside the abdominal cavity.

While the ovaries are of no great size, they contain many thousands of eggs. At birth from 35,000 to 200,000 are present, but when the girl becomes a woman—at puberty—only about 30,000 remain, the balance having been used up as food for the others. Yet only a fraction of this large number ever becomes ripe and capable of growing into a child, one every 28 days during the sexual life of about 30 years, or say 400 in all. For



EGG OF FOUR-FOOTED ANIMAL

*a*, whole; *b*, burst by pressure. In both the small body enclosing a still smaller round body is the important part. The smallest round mass (*c*) is shown more highly enlarged in lower left-hand corner.

EGG OF FOUR-FOOTED ANIMAL, GREATLY ENLARGED

*zp*, covering of egg. *vi*, yolk of egg. *gs*, *gv*, kernel of yolk.

the same number of years in the male it is estimated that the total number of spermatozoa may average 340 billions—in great contrast to the 400 eggs. Another instance of the waste by Mother Nature is the number of eggs laid by fish; in the cod-fish, for example, they are calculated to be over nine million, and in the sturgeon seven millions have been counted, yet of these almost incredible numbers only one may live to be a full-grown fish.

All the eggs of four-footed animals (mammals) are very small; so far as known, there is comparatively little difference

in size between those of the whale and of the mouse. The human ovule, first seen nearly a century ago (1827), is about three-tenths of a millimeter ( $1/25$ -inch) wide. Differing from those of birds, the animal eggs have very little yolk, and as they are not hatched soon as in fish, etc., the growing child has to be nourished by the mother by way of the "afterbirth."

The ovary—like the testicle of the male—manufactures a juice or "internal secretion," which governs the characters by which we tell a woman from a man. On account of their incessant activity the egg-glands are often the seat of tumors and other diseases for which they have to be taken out by doctors to prevent constant suffering and ill-health, or often to save life. In the past few years it has been found best to leave a little piece of the ovary, no matter how small, if it be healthy. In this way the woman is not unsexed.

At the upper part of the cleft between the greater lips of the external genitals is a little affair, a penis in miniature, foreskin and all. This is the clitoris, which in Greek means "tickler," and this expressive term, which is retained by the German language, well expresses the uses of the little organ; it is the principal seat of voluptuous sensation in the female sex, being lavishly supplied with nerves. Just below this is the outer opening of the passage from the bladder, by which urine is passed. Instead of being 8 or 9 inches long as in the male, it is but 1 to  $1\frac{1}{2}$  inches; for this reason stone in the bladder is not so common in women. The little gravel-like stones escape by the short canal, before they enlarge. In conclusion it will be noticed that the urinary channel opens under the clitoris—does not run through it as in the male counterpart.

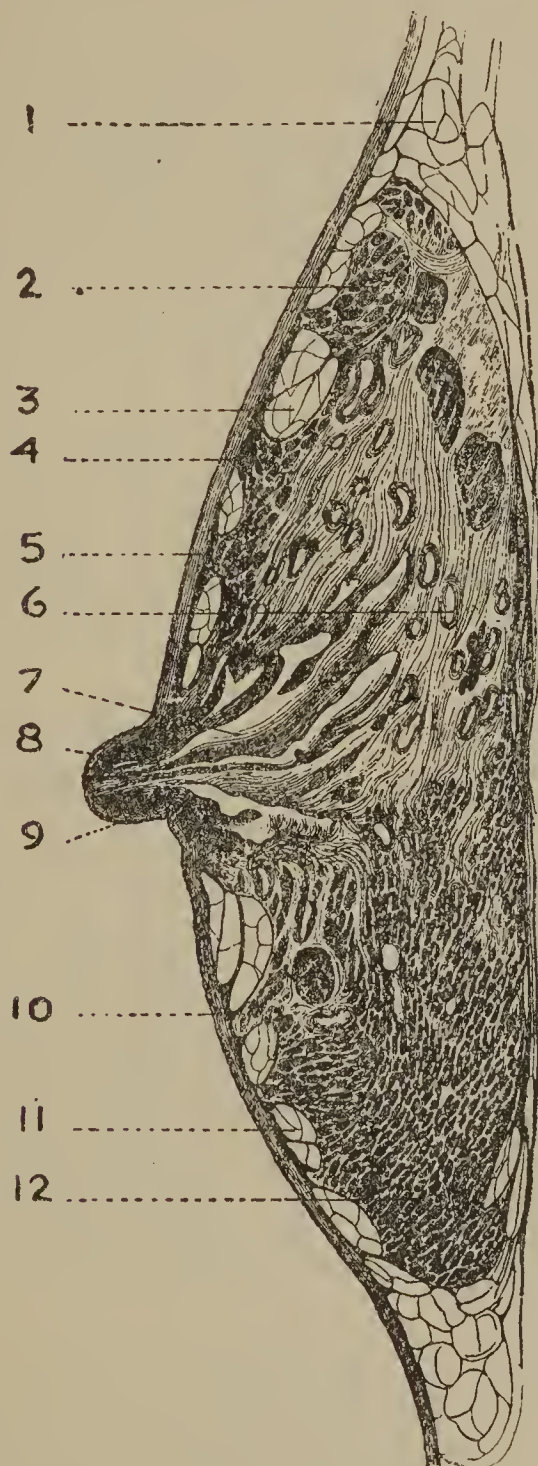
#### SECONDARY SEXUAL ORGANS OF FEMALE

The breasts (or mammary glands) are accessory organs connected with the reproductive system of the female. They vary greatly in size in different races, and vary also in the same individual. Before puberty they are small and undeveloped, practically the same as in boys. When womanhood is entered on at puberty, the breasts increase in size; as a rule, quickly. They grow large during pregnancy, and are largest during suckling of the child. While the increase is probably due mostly to the growth of the tissue which secretes the milk, there is consider-



able increase of fat as well. It is, however, common for the left breast to be somewhat larger. In civilized races, the shape is the well-known hemispherical one, but with savages the shape is more conical and pointed.

Each breast is made up of several lobes or divisions—15 or 20 in all—separated by partitions. The various lobes are dis-



BREAST DURING NURS-  
ING, DIVIDED THROUGH  
NIPPLE

- 1, Fat outside breast.  
2, 12, True breast  
tissue. 3, 11, Fat  
inside breast. 4, 5,  
10, Partitions. 6, 7,  
8, Milk channels  
(or ducts). 9, Nip-  
ple.

tinct, and the tube by which the milk escapes that is secreted by each lobe opens at the nipple. Around the nipple is a colored area of skin.

Generally speaking, there is but one pair, though an extra breast or even an extra pair are not very uncommon. Bruce,



a Scotch scientist, examined 315 individuals of both sexes, found more than two breasts in 7.62 per cent, and, strange to say, these superfluous organs were more frequent in men.

Some of the lower animals have as many as seven pairs, though numerous others have but one, as in mankind. When numerous they are arranged along the abdomen, but when only a single pair is present they are on the chest as in human beings. This latter position is supposed to be a relic of our tree-dwelling ancestors. Animals climbing about among the branches can carry their young most easily in this position without loss of balance. On the occasions where extra breasts are met with in human beings, it is interesting to find that almost without exception they are situated along a line drawn from the armpit to the bone over the bladder (pubes), recalling the plan found in the lower animals.

Some milk (or at least milk-like fluid) can often be squeezed out of the breasts of boy babies soon after birth, and about the time of puberty. Indeed, Sir John Franklin, the explorer, who perished trying to reach the North Pole, tells of seeing an Indian man who was able to nurse a child.

The Hymen (or Maidenhead). This little affair has given rise to an enormous amount of discussion, considering its small size.

It begins to be formed after the fourth month (or about midway between fecundation and birth of the child). While occasionally but slightly developed, it seems never to be actually absent. The usual shape is that of a ring encircling the birth-canal, with the opening in the middle; but it may run across like a band with an aperture on each side (rare); or may be nearly solid, with many small holes (very rare). Occasionally it is actually impermeable (rare), and produces serious consequences by damming up the menstrual fluid.

As a result of the first sexual connection it is torn, and in due time heals with its remains made up of several small protuberances (or "caruncles"). This primary rupture is followed by more or less bleeding, and is popularly looked on as a proof of virginity up to that time.

However, the central opening may be large enough for copulation to take place without tearing it, and the hymen has even been found persisting after childbirth. It may also be

ruptured by accidents, such as falling astride a chair or other hard objects, breaking of pots-de-chambre, and so on. During the bicycle craze years ago, the high peaks of the saddles were blamed for its destruction; as is the present-day custom of riding astride man-fashion, and wearing riding breeches.

(The only other secondary sex organ calling for notice is the vulvovaginal gland on each side of the external genitalia. While not large, averaging  $\frac{1}{2}$ -inch in length and thickness, they throw off a great deal of mucus during sexual excitement and especially during intercourse, the object being to lubricate the parts, and prevent injury.)

## CHAPTER II

# PHYSIOLOGY AND PSYCHOLOGY OF THE REPRODUCTIVE ORGANS

### EROTOGENOUS ZONES

ANY ONE of the five senses may be the origin of sexual desire, principally that of touch; but the areas in which pleasurable feelings can be excited are very unevenly distributed.

In the male, the only portion of the penis which is capable of voluptuous sensations, is the extremity (glans), this is because the organ is here covered only by the moist inner skin (or mucous membrane), and the nerves supplying the part are unusually large and numerous. Hence, when through accident or disease the end of the organ is lost, sexual gratification is abolished.

In the female, the nerve supply to the clitoris is three or four times as abundant as to the penis, due regard being had as to the difference in size. But while there is no doubt the clitoris is the principal seat of the sensation in this sex, it is by no means the only one. Many years ago a doctor of London, England, became notorious by recommending amputation of the clitoris for fits, excessive sexual desire and so on, and performed it on a good many patients. Alas! he and his few imitators soon discovered that such amputations had no effect on the masturbation and other ills for which it was applied.

The vagina (or birth canal) is another zone, also the free end of the womb which hangs down into that canal. It is rather common for some types of women to go from one doctor to another asking for relief from imaginary "womb troubles." During the manipulations and examinations which they are subjected to, sexual gratification is experienced, especially if sounds or similar instruments are introduced into the cavity of the womb. But a short time is required for the doctor to ascertain there is nothing the matter, but after politely dismissing the patient, she soon consults the next physician in her neighborhood, and at length makes the rounds of all.

Another zone is furnished by the lesser lips (labia minora) on each side of the external genitalia, these are furnished with



veins of good size, and swell markedly during sexual excitement. In about one-third of the patients in hospitals and dispensaries, these lips are longer, thicker and deeper in color than usual, which is generally regarded by medical men as the results of masturbation.

The skin also, is in women, a very susceptible area, or at least some parts of the body covering, the breasts, nape of the neck. That of the palm as well, in fact we understand tickling of the palms is often made use of to arouse sexual desire.

Of course, the lips are well-known zones, and a kiss is often the prelude to more intimate relations. From actual experiment it has been found that about one-half the individuals of either sex have more or less marked sexual desire by mechanical stimulation applied to the lips.

As nerves of the animal body approach the region which they are to furnish with sensation they break up into various networks and subdivisions, so the surface of contact will be larger. Now it seems astonishing that one kind of these, named Krause's end-bulbs, which are unusually large, should be found only in the lips and in the penis and clitoris.

At the other end of the digestive tract, the outer opening of the bowel (anus), is an erotogenous zone—especially in children. It is believed the latter sometimes bring constipation on themselves by not attending to calls of Nature, deriving pleasure from the increased size of the stool, and the difficulty of voiding it. Scratching the anus or titillating it is resorted to by older individuals.

Finally, a most powerful zone in the female is the nipple. This has a good deal of what is called "involuntary" muscular fibres in it, and under the influence of suckling, of cold—or even mental emotion—becomes hard (or erect). The manner in which this hardening (or erection) takes place is entirely different from that in the penis, or its analogue in the other sex, the clitoris. In the last two, the blood accumulates in the veins; while in the nipple, the little muscles shorten and thus render the nipple firm.

During nursing the sex feeling is diminished, or more strictly speaking, assumes a new character. I have often heard women say that the first time the infant takes the breast in its mouth all previous sufferings are forgotten. The consensus of their statement is that nursing the child is akin to strong sexual relations,



and indeed satisfies their sexual desires more than the real act. (Leo M. Gartman in "Sexual Truths," by W. J. Robinson, New York, 1919.)

A French author refers to an extraordinary case: A woman who had so much pleasure while nursing her child, that she endeavored to become pregnant merely to experience this pleasant sensation!

#### SEXUAL CRAVING, URGE, LIBIDO

The libido—or sexual urge—in the male is entirely independent of the manufacture of spermatozoa, for it may be present before puberty, or even in aged individuals who have long ceased to have the sperm animalcules in the seminal fluid.

That of the female differs from that of the male in several respects: The sexual sphere is more extensive and more widespread. The passive attitude is apparently greater. The libido in the female is more intricate, is less prone to make its appearance spontaneously, and generally needs to be excited; while the climax or "orgasm" comes on more slowly. After the sexual relationship is once begun, the libido tends to increase. The desire appears to manifest itself at more regular intervals, that is to say periodic, than in the male. So there is considerable difference between different women, as well as in the same woman at different periods. Finally, and probably owing to the passive attitude referred to above, the female is less liable to show evidences of excess.

#### COMPARATIVE SEXUAL DESIRES

Which sex instinct is stronger, that of the male, or that of the female, asks Gartman? Taking into consideration that there is far more polygamy than monogamy or polyandry, one is led to suppose that the male sex instinct is stronger. But there is another side to this picture. The man's function is only impregnation; the woman's functions are menstruation, pregnancy, lactation [suckling] and all these functions are more or less connected with sexual satisfaction. Comparing the time a male spends on his sexual activity with the time a woman spends on hers, there cannot be the slightest doubt that the female is far more active sexually than the male. (Leo M. Gartman, in "Sexual Truths," by W. J. Robinson, New York, 1919.)

About as many authorities can be collected to prove the

sexual urge is greater in men as the contrary opinion. So it is probable there is little or no difference. Though Tiresias, a famous sooth-sayer of ancient times (Greece), who claimed to have been a woman first then a man, decided the sex impulse in women is much stronger.

#### SEXUAL ABERRATIONS

There are several types of these, and the first one we refer to is—

**Satyriasis**, or excessive sexual desire in the male. It is difficult, if not impossible, to draw the line between the normal or healthy craving (libido), and the abnormal or diseased. For instance, consumptive patients of either sex are notoriously prone to excesses, even where far advanced in the disease.

In this affection, so called after the mythologic satyrs, the sexual impulse is so overwhelming, that the unfortunate patient has but one object in life—to gratify it. A few individuals are able to control themselves by sheer will-power, the rest cannot, and neither time, place, nor sex nor age, have any restraining influence. Medical literature abounds with instances of rapes by these frenzied individuals on aged women, on children, animals, even dead bodies. If no other means of satisfaction is possible, they resort to masturbation.

For some reason or other this distressing malady is less common than the next variety. For all practical purposes it is to be looked upon as a form of insanity, and may be produced by tumors, epilepsy, or other disease of the brain.

About the only possible treatment therefore, is incarceration in an asylum. Sometimes the attacks have been controlled by bromide of potash and other drugs which lessen the irritability of the nervous system; but they often return, either at lesser intervals or in an exaggerated form, and the sole recourse is confinement.

**Nymphomania.** Here the female sex is affected, and like the craze for strong drink (dipsomania), or for stealing (kleptomania), may come on at irregular intervals. The patients may have insane parents, or be afflicted with tumors or other diseases of the womb and the associated organs, but probably in most instances it is a disease of the brain itself. Since, other things being equal, the female is regarded as being more modest

than the male, an attack of nymphomania is apt to give rise to more scandal and sensation than when the stronger sex is attacked.

It is quite likely the notorious Messalina, wife of the Roman emperor Claudius, had this form of insanity. Not content with a horde of paramours, she is reported to have served as inmate of the brothels of the city, and at the end of her service announced herself as "*lassata sed non satiata*," (tired but not satisfied).

The only means of cure in many cases apparently is a safe retreat beyond the walls of an asylum.

**Sadism.** This form of perversion is characterized by the desire to obtain gratification through inflicting wounds on the partner, or else such torture is necessary before erection occurs. While known long before his time, it is christened after the Marquis de Sade, a French nobleman who lived in the 18th century and wrote several books praising the method in which he was said to be an adept. The stabbing of women with knives, scissors, etc., which seems to be on the increase lately in our large cities, especially in the darkened movie theatres, is an example.

Bluebeard, beloved of our childhood days, is another one of this type of insanity. He was an actual individual, Gilles de Laval, Marshal of France. After a distinguished career in defense of his country, with Joan of Arc, he retired to his castle of Retz, and enticed over one hundred children there, murdering them, and having intercourse while still in their death agonies, and with the blood flowing. He was able to continue this for fourteen years, but was finally detected (1440) and burned at the stake.

**Masochism.** Another form, but the reverse of the last, and named from Sacher-Masoch, an Austrian novelist who died not long since; he as well described the attractions of this aberration in a series of books. Unlike sadism, the patient wishes to have moral degradation or actual physical pain inflicted on themselves, for the purposes of preliminary excitement or as a means of gratification. The methods employed are generally so disgusting that they are described in chaste Latin, so we shall content ourselves by merely citing a mild form. Having the woman trample on the unclad body of the man, wearing shoes with many sharp nails projecting.



**Exhibitionists.** These are generally feeble-minded or actually insane subjects of the male sex. The clothing is specially arranged so as to expose the genital organs, either by unfastening a flap, or by pulling back the skirts of the overcoat. The favorite time for this practice is dusk, or after the street lamps are lit. When women are given to this practice, it is generally a symptom of nymphomania. (Aged men are often arrested for exposing themselves, but here it is more likely they have merely forgotten to fasten their trousers after urinating.)

**Fetichism.** Among savages a fetich is supposed to be the dwelling place of a god, and may be carried about the person, or hung up in the hut or any convenient place; or it may be a rock, a tree, a grove of trees, or some animal, such as a crocodile. From our point of view, a fetich is some object of wearing apparel used for sexual gratification, either by masturbation with it or in its presence, or else the securing of it affords such gratification. From time to time we read of women and girls having their shoes pulled off, or their handkerchiefs snatched by some man who escapes if possible. Either seminal emission takes place at the time of the theft, or the articles are carried home for employment in connection with masturbation. For that matter, the "Jack-the-clippers" who cut off braids or locks of hair, are fetichists, ejaculation taking place at the moment of the clipping.

**Sexual Perversion.** (Uranism.) This raw and not over-nice subject deserves but little consideration here. All the aberrations we have discussed so far are heterosexual—that is to say involving opposite sexes. In this one we have homosexuality—in other words, attraction by the same sex. The Biblical account of Sodom and Gomorrah proves the failing is of ancient standing. And, long after that, the Greek poetess, Sappho is said to have been an addict, and in the female it is often called Sapphism, or—from her birthplace—Lesbian love. Defenders of this type are to be found also, and a German attorney who is reputed to have been among the leaders of his profession, wrote a long series of works condoning the practice, and we believe tried to mitigate the laws of his country punishing it.



## CHAPTER III

### PUBERTY

**W**HAT is generally known as the age of puberty commences at the period when growth is approaching its limits. That puberty is reached, as a rule, at an earlier age in tropical than in temperate zones is explained by the circumstances that, in hot regions, there is a greater economy of heat energy, and development, therefore, is more rapid. But even between individuals living in the same climatic conditions, the rate of growth is so varied that it cannot be said that there is any fixed age for the onset of puberty. In England, what is known as the "symptoms" of puberty, begin to show themselves in the majority of cases as early as the age of twelve, while it is not unusual for the characteristic changes of puberty to be deferred until the seventeenth, or even the eighteenth, year.

Puberty is that period which marks the commencing development of the reproductive system, although this is not fully matured until some few years later. During the period of development there is, in most cases, even with men, a general instability of the nervous system; and this may be explained by the circumstances that the sexual factor plays an extraordinarily important part in the production and provocation of hysterical processes. Sensuality as a sexual feeling is quite dormant in normally constituted children, but at the period of puberty it begins to separate itself from the complex of loving and respectful feelings, which the child experiences towards those to whom it stands in intimate relations, simultaneously with the sexual organs themselves. The awakened sensuality in a young girl is often very apparent, expressing itself in various ways: in passionate attachment to another girl friend; in religious fervor; in enthusiastic devotion to an ideal. Owing to the extensive and intimate connection and sympathy existing between the reproductive and nervous systems, it is at this period of a girl's life that her parents and teachers should pay the most serious attention to their charge. Everything should be done to encourage self-restraint and interest in outside affairs; the young girl should not be allowed to be too much by herself, for introspection and idleness, above all, must be guarded

against. At the same time, she should not be allowed to tax unduly her mental or physical energies. Good and varied diet, and plenty of it, regular open-air exercise, combined with active games, are important conditions for the improvement and maintenance of health.

So far as the mind is concerned, Feldmann tells us it becomes altered in three directions, viz., will, intellect and the emotions. (*A*) The will, this becomes temporarily more or less unbalanced, resulting frequently in hysteria and other nervous and mental disturbances. (*B*) The intellect generally broadens. (*C*) The emotions like the will become more unstable, and she manifests a greater sense of modesty, though at the same time she shows a greater inclination to male company.

In the female the changes attending the onset of puberty have been well described by an English author in terms substantially as follows :

As puberty draws near changes both in the mental and physical characteristics are to be observed. Mentally the girl becomes more shy and reserved—the “tom-boy” disappears into the Juliet; modesty takes the place of innocence; her outlook becomes more curious, and she no longer accepts everything in life at its apparent value. The mysterious changes taking place spread their shadow over the whole range of her life. Such changes in varying degree affect the children of the poor classes no less than those of the rich and educated. From time immemorial this time has been regarded as a critical one, and in those of sensitive nature much care and tact are needed lest the girls become hysterical or given to self-questioning.

Other and no less remarkable changes occur in the body: the child becomes a woman. The first alterations to be found are a growth of hair low down on the abdomen and in the armpits, together with a gradual enlargement of the breasts, so they round out. Somewhat later fat begins to accumulate in certain portions of the body, the distinctly feminine and attractive roundness and plumpness.

The changes in the reproductive organs involve the uterus and ovaries principally; the former grows larger and changes somewhat in shape, the “internal secretion” of the egg-glands (ovaries) begins to make its effect perceptible. As for the external genitals, besides the hair growth, they become darker, larger, and the thin,

inner lips are now hidden, instead of being prominent as they are in babies and little girls.

There is a gland on the front of the neck, which when enlarged forms the well-known goiter. At puberty this becomes naturally rather increased in size in both sexes. The heart grows larger with age, and increases some 6 to 7 per cent. annually; at puberty, however, it takes a sudden jump, in both sexes again, and grows about threefold.

The reproductive glands begin to manufacture their characteristic products—spermatozoa and eggs, for the male and female respectively, but besides these “external” secretions as they may be called, we have equally important “internal” secretions, to which we have already referred under Anatomy of the Reproductive Organs. There are many differences of mind and body between the sexes, which are called “secondary,” such—for example—as the growth of the beard in the male, and the enlargement of the breasts in the female, and all such secondary manifestations of sex are due to the internal secretions poured into the blood. It is important to note that such secretions are formed in entirely different parts of the testicles or ovaries from those producing the sex-cells—the spermatozoa or eggs as the case may be.

#### THE PROCESS OF MENSTRUATION

The first appearance of the discharge of mucus and blood from the vulva—which discharge is termed *menses*, *catamenia*, and the process with which it is associated, *menstruation*—may be said to mark the onset of puberty, although, in this connection, it may be remarked that, several years ago, at one of Barnum’s “Baby Shows,” there was shown a little girl not quite three years of age who “menstruated regularly.”

The term menstruation includes that of *ovulation*, which is the evolution of a germ-cell, egg, or ovum, from its ovarian bed, and its passage through the uterine system. But the development of germ-cells does not begin, as is popularly supposed, with the first appearance of the catamenial flow; the continual rupture of ovisacs and the discharge of the contained ova occurs throughout childhood, ovarian vesicles being known to exist even in the human fetus. That the ova evolved during childhood are capable of being fertilized and of developing is evidenced by the many



cases of girl-wives in India who have become mothers before they menstruated.

There is a good deal of popular misconception concerning the nature of menstruation. Some women often insist that "they *never* menstruate," others have been heard to declare that they "menstruate during pregnancy." Of course, in all such cases, the mistake is made of confounding the flow of blood and mucus, which in the majority of cases accompanies menstruation, as the process itself. It must be understood that menstruation is neither more nor less than ovulation—the periodic passage of the unfertilized ovum from the ovary to the vulva, and that the flow of blood and mucus is merely an accompaniment, an anomaly that has come to be the habit of woman in consequence of the deleterious effects of civilized life. It is well known that the healthier a woman is, the less quantity of blood she discharges at the menstrual period.

But we must defer explanation of this appearance of blood and mucus simultaneously with the periodic discharge of the ova until we have seen what constitutes the process proper of menstruation.

#### THE MENSTRUAL DISCHARGE

*(Monthlies; Monthly Flow; Periods; Monthly Sickness; The Flowers; Being Unwell.)*

This periodic discharge is not confined to the human female alone, it is also met with in monkeys, as has been known for hundreds of years. From the earliest ages this mysterious flow has been looked on with wonder, naturally the first supposition was women were unclean at this time, and among many tribes, as our Indians, were obliged to dwell apart in specially-constructed wigwams or huts.

Again, some noxious influence was believed to emanate from them. Thus Pliny, the old Roman naturalist (in the first century of our era), wrote: "On the approach of a woman in this state, seeds which are touched become sterile, the grass withers away, plants in the garden are parched up, and if she sits beneath a fruit tree, the fruit will fall off." While long after him, the church councils of Nice (A. D. 325), and Laodicea (A. D. 364), issued decrees to the effect that during menstruation women



could not enter or even approach churches, much less partake of holy communion.

Nearly all the ancient Oriental peoples thought it a purifying excretion, and came to the consequent conclusion that the menstruating woman was unclean. The old Parsees confined her, while a perusal of the fifteenth chapter of Leviticus will show the degree of horror with which the Jews regarded her. Not only was she to be put apart for seven days, but whosoever came in contact with her, or with anything she had touched, was also declared unclean. The legacy of this mistaken opinion of the nature of the menses had a characteristic effect upon the minds of the writers of the Middle Ages. To their frenzied superstition the menstrual blood appeared as something dreadfully poisonous, while the menstruating woman was regarded as a very dangerous person; did she breathe on a knife, its edge would be blunted; her presence drove dogs mad, interfered with the fermentation of new wine—a superstition still existing in some wine-growing districts; leprosy was supposed to result from intercourse with her. The idea of the uncleanness of the menstrual discharge still lingers; abstention from intercourse with a woman during her monthly periods is still considered to be a hygienic necessity.

The French lady physiologist, Madame Bovin, who had facilities for investigating the subject of menstruation, denied to her male contemporaries, demonstrated that, as regards the blood which accompanies the menstrual discharge, this is nothing else than hemorrhage, being ordinary venous blood, more or less decomposed according to the time it is retained in the generative passages. As to the question why there should be hemorrhage as an accompaniment of menstruation, we cannot do better than quote the argument advanced by Dr. Trall, on pages 59 and 60 of his "Sexual Physiology": "Why should there be hemorrhage as an accompaniment or incident of menstruation. A reference to the nature of the process will set this matter in its true light. All organs whose functions are performed periodically—for example: the ovaries during ovulation, the male organs during coition, the breasts during lactation, and the stomach during digestion—have a special determination of blood and nervous influence to the part when the function is to be exercised. This is clearly for the purpose of supplying the part with the material

requisite for the proper performance of its function. In the case of digestion the increased quantity of blood sent to the stomach is to supply the material more abundantly for the secretion of gastric juice. In sexual congress the blood is specially determined to the organs concerned in secreting the seminal fluid and conveying it within the sexual organism of the female. In lactation the determination of blood to the mammary glands is for the purpose of supplying the parts with the material from which the milk is formed. And in menstruation the special determination of blood and nerve force (which are always coincident) is to furnish the elements for the evolution of the germ and its nourishment. A certain degree of distention, congestion, plethora or 'erethism,' is necessary to distend the capillary vessels, so that the fimbriated extremity of the Fallopian tube may grasp more completely the matured ovum, and insure its passage to the uterus: and if the ovum in its passage becomes impregnated and fixed to the walls of any part of the reproductive channel, the unusual quantity of blood, or some portion of it, is needed to supply the elements for its nourishment and growth, and for the development of its appendages—the membranes and placenta. In some cases the blood, after imparting the nutrient materials required, is wholly returned to the general circulation, so that no hemorrhage occurs. But, in most cases, more or less of it is effused into the uterine cavity and expelled per vaginam."

Dr. Trall is of opinion that if women were more vigorous and firm in their muscular tissue, they would lose far less blood than is commonly the case, not only during menstruation, but also at parturition. He speaks of instances of women, married and single, who hardly stained their linen at the menstrual periods, and remarks that all of these women enjoyed unusually excellent health. "Women," he says, "who live a more simple life, and are less enervated by the luxuries and stimulants of artificial society, even though they are exposed to excessive toil and many hardships and privations, have comparatively few of the sexual disorders common to women all over the civilized world, and they lose comparatively but little blood during menstruation."

It is generally held that the mucous discharges with the blood is due to the shedding of the mucous membrane of the uterus. This view, however, is opposed by many physiologists, who are of opinion that this mucus is "a product of inflammation, analogous

to that which occurs in croup, diphtheria, tubular diarrhea, and catarrh of the bladder." We venture to quote Dr. Trall again, he being a supporter of this view: "In cases of dysmenorrhea . . . the mucous membrane is in a state of chronic inflammation, and exudes or excretes (not secretes) with other impurities or effete matters, a fibrinous material—a kind of vitiated coagulable lymph—which, concreting and hardening, becomes a preternatural membranous covering. Sooner or later it is 'cast off,' and expelled by the process of sloughing, precisely as happens on all mucous surfaces under similar conditions of disease. Sometimes this membrane is cast off from the whole inner surface of the uterus, in the form of an entire sac or cyst containing a viscid fluid (which has been mistaken for abortion); but more frequently it is expelled in fragments of great or less consistency or tenacity. Females who suffer severely of that form of menses, termed dysmenorrhea, or painful menstruation, expel this membranous matter from the uterus at each menstrual period. The pains attending the uterine efforts in the expulsion of this abnormal product are frequently agonizing, far exceeding in intensity the severest pains of ordinary labor at full term."

The direct cause of menstruation is not yet settled, but the generally-accepted opinion is that it is connected with the escape of the egg. If the latter is not fertilized it is flushed out by the menstrual fluid. When, on the other hand, a new life is being formed, no flow occurs again, as a rule, till after the child is born. At about the time when the flow is due to begin, the blood vessels of the womb become full of blood, and the moist lining of that organ swells up. Some blood escapes from the distended vessels into the hollow of the womb, thence externally through the birth-canal. When we cut the skin covering of our bodies, the blood which pours out, hardens or "clots" as the doctors say. Menstrual blood never does, the reason being it is mixed with slime (mucus) from the womb itself and the vagina, or birth-canal.

Adolescence in the female is evidenced by the onset of the menstrual flow. The age at which this is first noticed differs somewhat with the climate, the height above sea-level, etc., though the difference is not so marked as was thought at one time. The average for hot climates is from 11 to 14 years, and for cold ones, 15 to 18. For those between these extremes—or temperate



climates—it is from 13 to 16. Of 6,550 cases some 1,193 occurred at 14 years, and 1,240 at 15 years. Many cases are known of the onset at an extremely early age—3 or 4 years, or even earlier, but such instances are due to the presence of tumors or some other disease condition.

Among the poorer classes of the population menstruation may be said to make its appearance later, on the average, than in people of easy circumstances. While owing to the hard labor and insufficient food, the change of life comes on earlier than in their well-to-do sisters.

In savage races, the onset is celebrated by more or less feasting by the family, and the costume or ornaments usually worn by the women of the tribe is assumed.

Only about 10 per cent of the Eskimo women menstruate during the winter months, when the sun is away. When it reappears they pass through a period of great excitement sexually, resembling that of “heat” in lower animals, and Arctic explorers confess that their attentions at this time are very embarrassing.

Once started the flow continues for 30 years or so. In 500 German women the most frequent duration was 32 years; in one-half the total number it ranged from 27 to 34 years, or an average of about 30. In a like number of English women the average was 31.8 years.

Menstruation comes from a Latin word which means “a month,” and it is not surprising to find that it returns every month, not a calendar month, however, but a *lunar* month or every 28 days. In some it occurs more often, every 21 or 23 days; but in most instances it is of the “28-day type” so-called. The flow lasts for about 3 to 4 days, gradually growing less until the blood is replaced by a slight amount of mucus, and then ceases for nearly 4 weeks. According to an English physician (Herman), the 28 days are divided into stages as follows: Pre-menstrual swelling and congestion, 7 days; actual flow, 4 days; post-menstrual subsidence, 7 days; stage of rest, 10 days.

Instead of the “28-day type” women may menstruate only every 5 weeks; or more frequently, once in 3 weeks. If unaccompanied by any other symptom, this irregularity is no reason for undue anxiety. Indeed there is generally some irregularity for a time after the flow is established at puberty, before the customary routine is entered on. Women with some disease of the

generative organs, especially tumors situated in the thickness of the womb, are subject to the discomfort and pain such as they experience at the regular period, but coming on halfway between. This is the "middle-pain" of the European authors, by whom it was recognized.

As regards the amount lost at each period, this varies from an ounce up to nearly a pint.

A few lucky women feel better than usual at the time of this monthly flow, but most of the sex are depressed mentally as well as physically. They are fretful and irritable, and much subject to headaches. There is also considerable heaviness and discomfort low down in the abdomen.

In fact, the body as a whole seems to be upset. While the extremities are chilly or cold, there may be hot flushes in other parts. "Fever blisters" are common about the lips, and elsewhere on the body, nettle-rash and many other skin affections. Palpitation and changes in the pulse show the effect on the heart, while that on the stomach and bowels is evidenced by impaired or lost appetite, vomiting, gas accumulating in the bowels, with constipation or diarrhea, or one alternating with the other. Concerning the organs of the senses—there may be impairment of vision and difficulty in distinguishing colors. Hearing may also be more dull; the voice cords often swell so much the voice for singers is changed, and vocalists may be unable to carry on their singing.

Theoretically it would be ideal if the woman could rest during the whole of the menstrual period. This, of course, is out of the question in most cases.

A few hints may not be out of place here to lessen the inconveniences: There is, as a rule, considerable antipathy to any undue exertion of body or mind, and this should be assisted insofar as it does not conflict with the daily affairs of a healthful life. There is no restriction as to diet, though it is essential meals be taken at regular intervals. Plenty of sleep is likewise necessary, and outdoor exercise should not be curtailed.

There is a great deal of misconception in the popular mind about the question of bathing during the menstrual period. No fear whatever need be entertained, provided the *baths are not cold*. On the contrary, warm or hot baths can be resorted to, a sponge-bath, in other words. And the external genitals should be sponged off with warm water every day—or preferably twice daily—in

addition to promoting cleanliness and absence of odor, these local ablutions allay irritation. So soon as the flow is over it is well to flush out the birth-canal by means of a douche, this prevents any remnants of the flow being left behind to decompose and set up irritation.

Exercise must be moderate and not violent. As already remarked, the womb is full of blood at this time, and heavier than between periods—consequently there is some probability that undue exercise may give rise to displacements of the womb, a most prolific source of feminine ailments.

Dancing comes in the class of “violent” exercises, and it is almost incredible that misguided young women should tamper with their future well-being by placing the feet in cold water, thus checking the flow to enable them to attend dancing parties.

Irregularities in the flow may be divided into four groups: Flow scanty, altogether absent, too great, and painful.

Scanty, the causes and symptoms of this variety are just about the same as the next group—

Total absence may happen from many causes—leaving out some obvious ones, such as lack of the uterus or ovaries, pregnancy, change of life, or after surgical operations which call for cutting away of the organs, it may follow fevers, consumption, the “green sickness.” Occasionally there is some deformity, such as a tough hymen with no opening in it, and often such membranes have been cut by the doctor letting many ounces of thick, tarry blood escape. Change of climate often has much influence and newly-arrived emigrants may be irregular for a long time, or see no flow whatever. American women, on the contrary, during a European tour may be equally irregular. It must be confessed, however, that oftentimes no cause whatever can be discovered, even after a most painstaking examination. While suppression during pregnancy is customary, exceptions are by no means uncommon. One or two periods may appear after conception takes place, or the flow may return while the woman is still nursing her child, and in a few queer individuals, menstruation and pregnancy occur before the child is weaned.

In striking contrast to the group just considered is the one in which the flow is profuse. Here we are dealing, as a general thing, with some diseased condition of the womb. Occasionally it is produced by causes elsewhere, which in turn produce in-



creased accumulation of blood in the womb, by slowing the blood current, heart and liver disease, constipation, etc.

There is no strict rule, what may be profuse for one patient is customary with another, or possibly not so much. The amount of the flow itself may be increased or the duration of the period. As already observed, the discharge during menstruation remains fluid, if solid pieces (clots) are passed it is a sign of some disturbance, and medical advice should be sought as quickly as possible.

Besides a profuse flow at the usual time of the period, there may be bleeding at other times of the month as well, this too indicates some disease of major importance to be looked after without delay.

We have seen that the everyday form of menstruation is attended by more or less discomfort, but when this increases to such an extent as to merit the name "pain," we are dealing with the fourth group or—to use a scientific word occasionally—dysmenorrhea. In addition to the sharp pain like neuralgia, the woman for days following the period may be weak and worn-out. Each return of the period is looked forward to with dread and fear. Sometimes the lining of the womb is expelled in shreds, or in a little bag, a complete cast of the interior.

The agony suffered is such that the wretched women are actually beside themselves, and several years ago, one in Chicago after killing a small boy of the neighborhood who was annoying her by his juvenile noise, set up this painful menstruation as her defense and was duly acquitted.

Instead of bleeding from the womb, it has been claimed this may take place from various unexpected localities—the breasts, lips, lungs, from the common "piles," and from wounds or old sores (ulcers). It is also alleged to come from the nose, but bleeding here is somewhat common with the usual flow from the womb. A great many of these unusual cases were reported long ago when doctors were not so critical as they are at present, and nowadays the tendency is to look with suspicion on them, generally as an evidence of hysteria in women who desire to attract attention to themselves. Though to be sure in a case here in Chicago last year in which the bleeding seemed to come from the armpits, any collusion of the patient was prevented, yet it could not be proved to be blood.

## CHLOROSIS

Chlorosis is a special form of essential anemia. The symptoms are similar, and it is benefited by the same therapeutic measures. But chlorosis, or "green sickness," may be distinguished from the other anemias in that it has a special relation to the reproductive organs. Moreover, it is questionable whether it ever appears at all in the male sex. Chlorosis shows itself soon after puberty is reached. Girls who are ill-fed and ill-housed, debarred from sunlight, fresh air and exercise, usually fall victims to this disease. Breathlessness, heart palpitations, irregularity of the menstrual periods, inflammatory affections of the genitals, gastric pains, sickness and vomiting after meals, are among the more general symptoms. The complexion acquires a sickly yellow-green tinge, the lips become bloodless. The patient suffers much from dizziness, while apathy, general depression, mental heaviness and stupidity are features which sometimes become quite marked.

As to the question whether chlorotic women should marry, we beg leave to quote Prof. H. Rosin, of Berlin, who is an acknowledged authority on diseases of the blood: "Since chlorosis generally begins about the time of sexual maturity, and lasts for many years, resisting all treatment, chlorotic patients or their parents may often find themselves confronted with the question whether marriage is in their case permissible or desirable. The medical man also has often occasion to ask himself whether girls suffering from chlorosis may marry without injury to their health, without detriment to the eventual offspring, and without disadvantage to their married life. We may perhaps answer this question in the following manner: Where the female concerned is still very young, every possible attempt must be made to cure the disease before marriage is entered into. Experience shows that the majority of cases of chlorosis are cured before the age of twenty, especially if the proper treatment is instituted. It is not, however, possible always to wait till a cure has been accomplished; a somewhat advanced age, the prospect of a happy marriage, an existing engagement, and other circumstances, render sometimes a quick decision necessary. We must therefore rely to a great extent upon what we know from experience, namely, that very often, perhaps as a rule, chlorosis disappears

completely in young married women soon after their marriage, and especially with the beginning of pregnancy. The relations of chlorosis to the genital function receive in this way further confirmation through the favorable results achieved by a regulated married life. The doctor may therefore not only give his consent to the marriage of a chlorotic young women where suitable treatment has been either impossible or unsuccessful, but he may in certain circumstances actually recommend it. It must not, however, be forgotten that there are now and then cases of chlorosis which are not benefited by marriage, though it must remain an open question whether they are real cases of chlorosis, and whether there are any chlorotic married women at all. The probability is that they ought to be reckoned among the cases of constitutional anæmia."

#### SEMINAL EMISSIONS

These may occur either at night or in the daytime. The first way is by far the more common, whence they are usually called "wet dreams." While often referred to as "pollutions," this is an exceedingly inappropriate term, there is nothing *polluting* about the occurrence, any more than evacuating the bladder or the bowels. After the age of puberty in the male, when the fluids which are discharged with the seminal fluid are not evacuated by the way of copulation, they make their way out at more or less frequent intervals, and—as just stated—generally at night. (It is probably not generally known that in hanging, either by suicide or by judicial execution, there is always an escape of the seminal fluid.)

Such perfectly natural discharges are one of the principal items of the stock-in-trade of the "lost manhood," "nervous debility" and other quack-advertising doctors. As a matter of fact they should be looked on as a sign of health, not of disease. There is no fear of insanity hovering over one, it is especially necessary to note the really important juice manufactured by the testicles, the "internal" secretion is not lost, but is saved for the needs of the body. The only one escaping is the external one, sometimes containing spermatozoa.

Curling, a London surgeon, told of a pitiful occurrence, an apprentice who lived with his master was upbraided so much by the latter's wife for soiling the bedclothes, that in despair he



took a razor and cut off both testicles, nearly bleeding to death before being discovered. Origen, the holy Christian father of the third century, performed the same mutilation but from a different motive. Owing to a misinterpretation of that passage in Holy Writ (St. Matthew, xix, 12) :

“For there some eunuchs which were born from their mother’s womb; and there are some eunuchs which were made eunuchs of men; and there be eunuchs which have made themselves eunuchs for the kingdom of heaven’s sake. He that is able to receive it, let him receive it.”

So far as frequency is concerned, they may occur often for a week or so, then several weeks may go by without any at all, to be succeeded by another series close together. Or, they may take place at fairly regular intervals. An English observer thought so much of his fellowman that he noted the dates of the discharges in his own case for a total of 8 years, and found they averaged 37 a year. In three other individuals they occurred once a week; three times a month, and once a month; and as the whole four were engaged in intellectual work—were probably more common than if occupied with manual labor.

When boys near the age at which this natural function is likely to begin, they should be informed about it, and that they need not and must not worry about it. If not instructed needless alarm is often excited, sometime as much so as in young girls who are left in ignorance about their monthly periods.

To prevent too-frequent discharges a few simple precautions are useful: Drinking water, ginger-ale and other soft drinks late in the evening is not good, the bladder becomes full and may press on the little sacs or storehouses of fluid under it. Nor is it well to lie on the back while asleep, and to prevent this it may be necessary to tie a knot in a towel and fasten the knot over the back; or some hard object like a small ball may be used for the same purpose.

Seminal losses in the daytime may occur instead of those at night, or in addition to them. They are less common than the nocturnal variety, and in many instances the fluid forced out by the passage of a hard stool, etc., is from the prostate or urethra (prostatorrhea, or urethrorrhea). Nevertheless, if the seminal fluid does actually escape during the day, there is something wrong and good medical advice should be sought.

## CHAPTER IV

### CONTINENCE

**I**N the consideration of this subject, as a German writer points out, the champions of the strictest sexual prohibition are often of the age when a man's thoughts are no longer troubled by sensuality.

Tannenbaum enumerates the great variety of opinions held on this subject by some modern writers :

- (1) Abstinence is harmless. (13 authors).
- (2) Is harmful in some cases. (3).
- (3) Though harmless, normal intercourse is preferable. (1).
- (4) It leads to masturbation, but is preferable to venereal diseases. (1).
- (5) It prevents venereal disease. (2).
- (6) Is harmless up to the age of 30, but after that it tends to produce psychic anomalies. (2).
- (7) It leads to masturbation and hysteria in some cases. (1).
- (8) Is incompatible with health. (1).
- (9) Leads to unnatural practices. (1).
- (10) It improves the will-power. (1).
- (11) Is good up to the age of 25. (2).
- (12) Is harmless up to the age of 25. (1).
- (13) Is beneficial at all ages and conserves the energies. (1).
- (14) Neither normal nor beneficial, and as a rule leads to masturbation. (1).
- (15) Harmful after 20 and may cause serious disturbances, besides impairing the capacity for work. (1).

He also remarks that one of the best-established results of modern research is the fact that the sexuality of different individuals varies. Just as people vary as to the quantity of food, sleep, drink or rest that their constitutions require, so do they vary as to the quantity of sexual indulgence. Some are content with coitus once a week or once a fortnight; others require it much oftener.

We shall introduce first some arguments for—then some against the practice of continence, and begin with a famous Eng-

lish physician, a specialist in nervous diseases, who years ago (1892) wrote—

“With all the force that any knowledge I possess, and any authority I have, can give, I assert that no man ever yet was in the slightest degree or way the worse for continence or better for incontinence. From the latter all are worse morally; a clear majority are worse physically; and in no small number the result is, and ever will be, utter physical shipwreck on one of the many rocks, sharp, jagged-edged, which beset the way, or in one of the many beds of festering slime which no care can possibly avoid.”

Next in point of time comes Carpenter—

“After all, purity (in the sense of continence) is of the first importance to boyhood. To prolong the period of continence in a boy's life is to prolong the period of *growth*. This is a simple physiologic law, and a very obvious one; and, whatever other things may be said in favor of purity, it remains, perhaps, the most weighty. To introduce sensual and sexual habits—and one of the worst of them is self-abuse—at an early age, is to arrest growth, both physical and mental. And what is even more, it means to arrest the capacity for affection. All experience shows the early outlet toward sex cheapens and weakens affectional capacity.”

Another specialist for nervous diseases—Näcke—found the inmates of insane asylums are not unfavorably affected by continence, which in their case is obligatory. He adds that continence can have but infrequent unfavorable effects, and even if these do occur they are of mild degree. He does not believe that continence is apt to give rise to insanity even though there is some family predisposition, on the other hand, he denies that masturbation or sexual excess can produce it either (*Archiv f. Krim. Anthropol.*, 1903).

We have frequent occasion to quote Michels, and do so with great pleasure for several reasons: While professor in a Swiss university he occupies a similar position in one at Turin, and is thoroughly familiar with the sexual life of Italy. He is not a physician, but the best type of educated layman, studying the question from the social and psychologic standpoint. As regards continence, he writes:

The female has natural sexual needs just as much as the male. The male is apt to insist that his own unbridled sexuality



before and during marriage is the necessary outcome of his sexual needs; but he goes on to forbid it to women—at any rate to those of his own class and within his own circle—an unbridled sexuality similar to his own, on the pretext that in them sexual needs are non-existent, or if existent have an intensity enormously inferior to those of men.

Pre-conjugal continence on the part of the male, he adds, is eminently desirable on grounds alike of individual and racial hygiene. Some contend that for the sake of the young wife, at least during the early days of marriage, it is eminently desirable the husband should be one who has already acquired confidence and experience in this department of life. In this way, we are told, the young woman's nervous susceptibilities will be spared, and her initiation to sexual enjoyment will be facilitated. Some go so far as to maintain that it is the moral duty of the future husband towards the future wife to seek preliminary initiation with the women of the market-place. In the author's view this can only be regarded as an unworthy subterfuge, as an attempt to find specious moral grounds for profoundly immoral conduct. An objection worthy of more attention is the contention that sexual abstinence in young men entails serious physical dangers. But without going so far as to join Bürger in his enthusiastic contention that sexual abstinence is the source of all energy and all health, I believe we are justified in concluding, as a result of personal experience and observation, supported by the views of certain specialists, that men are able to renounce sexual gratification without serious physiological consequences. But even if it were scientifically proved that sexual abstinence is physiologically harmful, we must never lose sight of the fact that these harmful results in no way outbalance those which are the outcome of pre-conjugal sexual indulgence—as we learn from statistical inquiries into the prevalence of venereal diseases. These maladies are so common and their effects are so disastrous that it would be absurd to assume that the injurious results of abstinence to the individual and collective life, incapable as these are of being measured in precise figures, can possibly have a widespread corrupting and physically deleterious influence in any way comparable to the recorded results of extra-conjugal sexual intercourse.

In thus insisting on the need for a higher ideal of masculine

chastity, it is far from being the intention to pass judgment from a superior moral altitude upon that which elderly men, with a regretful memory of the splendors of their past, affect to speak of as "the sins of youth." Nor is it necessary to condemn the youth whose sexual passion has overwhelmed him amid the storms of the senses, so that he has found it impossible to preserve intact the purity of his childhood.

But I hold that it is a praiseworthy action for a young man to preserve for his wife the first freshness of his sexual emotions; and I feel moved to condemn the stupid dissipation of sexual energies on the part of so many of our young men, influenced as they are by a perverse convention which maintains, with courage worthy of a better cause, that youth must sow its wild oats, and influenced also by the strange medical doctrine that he who fails to satisfy his sexual needs with clockwork regularity is a necessary prey to the most varied disorders of body and mind.

Now for some arguments *against* continence:

Johannes Dück (in "Sexual Truths," by W. J. Robinson, New York, 1919):

From 122 men asked how they felt in regard to abstinence, the following answers were received: Eighteen stood it easily; 54 bore it only with difficulty; 31 stated they did not abstain; 19 either failed to answer or gave evasive replies. Of the 62 whose testimony is of value, we find 12 indifferent to the sexual urge to 50 who felt it strongly.

Some 42 women asked similarly, returned the following answers: Eight abstinence easy; 21 difficult; 3 no abstinence; 10 no answer or evasive, or five women unaffected and nineteen affected by the sexual urge.

Fritz Wittels (in "Sexual Truths," by W. J. Robinson, New York, 1919): Partisans of premarital continence recommend the practice of sports as a derivative. This may hold good in bourgeois circles, but what of the thousands who are being treated in free clinics for venereal diseases, though they work themselves to death in factories or mines? Sports may be helpful to those who wear out the carpets in the reception rooms of physicians, for bureaucrats and idlers. An athlete dead-tired after a period of training, a cavalry officer who has exhausted ten mounts, fall into bed and do not think of woman. In fact they think of nothing whatsoever, they become stupid animals



and nobody will eulogize football champions as the ornaments of the race.

"Abstinence," according to Lallemand, "causes a general irritability of the entire organism, which may appear as erotic delirium. I do not here (in "*Des Pertes Seminales*," Paris, 1839-42) need to remind my readers of the many different symptoms due to abstinence, of the tortures to which some people have submitted themselves to evade its violence and persistency, of the crimes which have been committed from insanity caused by it, etc. It is evident that a prolonged abstinence is impossible for those who possess strong sexual organs, without causing great suffering to themselves and even certain dangers to the community."

Lallemand further proves how those who easily stay abstinent are men without sexual instinct. This experienced physician also declares: "strong moral, religious principles from childhood, good examples, etc., are usually considered reasons for chastity, but, although I admit the beneficial influence of a good education, gymnastics, etc., there has been something else which has made abstinence simple for certain men, viz.: lacking irritability of the sexual organs.

"Everyday occurrences prove that moral and religious men of a stronger constitution hasten to marry, as the only way of escaping the temptations of those who try to resist them and regret their giving way to them."

Lallemand further wrote: "I am aware that one may mention people who live abstemiously without injury to their health, but who know their most intimate secrets? Many of the sufferers of whom I have spoken have been considered healthy. Do not be deceived; their health is often only seeming; the least causes disturb it and relatives and friends are ignorant of the real origin of the many ailments of which they complain. The physician very often knows even as little as the sufferer himself how to relieve his condition."

Robinson himself writes:

The preaching of abstinence up to the date of marriage, no matter how late that may take place, is bound to increase the sum total of our sexual misery. It is bound to make us as a nation impotent, neurasthenic, neurotic and perverted. If we want to escape the sexual misery, to diminish its amount, we must remove



the obstacles from the normal satisfaction of the sexual instinct. The shackles which have been put upon the most important instinct should be broken. Sex relations should be made easier and not harder. Every young man should be fully instructed in the use of the most efficient venereal prophylactics, as well as in the use of the most harmless and efficient measures for the prevention of conception. And the moderate, normal satisfaction of the sexual instinct should be considered not a reprehensible thing, but commendable and desirable. Only then can we hope to avoid a great deal of the sexual misery that is now overwhelming mankind, only then can we hope to develop a sane, healthy, normal, vigorous and virile race.

Finally there is no drug or medicine known by which "the passion" can be kept down, and continence made easier.

Nyström concludes that it is desirable that continence should be preserved as long as possible in order to strengthen the physical health and to develop the intelligence and character. The doctrine of permanent sexual abstinence, however, he regards as entirely false, except in the case of a small number of religious or philosophic persons. "Complete abstinence during a long period of years cannot be borne without producing serious results both on the body and the mind. . . . Certainly, a young man should repress his sexual impulses as long as possible and avoid everything that may artificially act as a sexual stimulant. If, however, he has done so, and still suffers from unsatisfied normal sexual desires, and if he sees no possibility of marriage within a reasonable time, no one should dare to say that he is committing a sin if, with mutual understanding, he enters into sexual relations with a woman friend, or forms temporary sexual relationships, provided, that is, that he takes the honorable precaution of begetting no children, unless his partner is entirely willing to become a mother, and he is prepared to accept all the responsibilities of fatherhood.

And lastly, Howard, in *Sex Problems Solved*, says that "when strong sex feelings are suppressed through a period of years and are gradually working upward to the upper conscious, the impulse for relief becomes overpowering. In the cases of unmarried women, neglected married women and widows, self-relief is resorted to as the only possible way of acquiring peace of mind and quiet of body.

"This is neither a sin nor crime under forced abstinence; it is as old as the living world. The women who occasionally relieve themselves by manual methods are not morally twisted nor in any removed from the norm; they simply have a constant or periodic, generally the latter, physiological hunger which must be satisfied. They have not been taught that there is a way for them to switch this hunger or impulse into other forms of expression through work that will occupy the mind, satisfy in a healthful manner natural cravings and give them the pleasure of knowing that they are really doing good to humanity.

"It is scarcely necessary to state that self-relief, if kept up for a long period, does affect the ethical standard of the women. It weakens self-respect and produces a state of introspection of the wrong sort. From a purely physiological standpoint it is not as harmful as in the male. Of course, in the girl and young woman the practice is reprehensible and demonstrates a defect in character; especially some mental defect of an acquired character. As a rule, this baneful habit in young women was started in childhood through instruction and suggestion of an older girl: generally one of the born defectives whose personal charms and physical energy are so deceiving in girlhood."

#### THE PROBLEM OF CONTINENCE\*

It is the idea of continence which has suffered, perhaps, more than any other sexual problem, from the confusion of the ethical with the physiological norm. Starting with the assumption that all sexual desire is, by its very nature, of the flesh, and therefore "beastly," the medieval church did not hesitate to proclaim the ascetic ideal as the aim of life. Sex gratification was only allowed as an act of grace, as it were, in matrimony, which had to be specially consecrated for this purpose. This mode of thought still reverberates in the opinions expressed by certain purists who maintain that abstinence outside of marriage—under all conditions, without any qualifications whatsoever—is the only possible standard of virtue, little or no heed being given to the problem of abstemious behavior in married life, which is here just as essential to a high moral tone as it is outside legalized marriage. In order to substantiate their position, the partisans of this school of thought have endeavored to bring forward scien-

---

\* Dr. S. Herbert in *The Physiology and Psychology of Sex*.

tific evidence in order to prove that abstinence—*i. e.*, total abstinence from sex gratification—is not only possible, but from a medical point of view, harmless.

Now, it cannot be doubted that, as regards the former point, there are a good many individuals who are able to withstand the temptation of sex and lead a pure life. It is just these persons who never fail to insist upon their mode of life as the only righteous one, the one which is attainable and ought to be attained by all. These good people forget that, just as in other human traits, there exist considerable variations in the promptings of the sexual impulse, and that we must allow for such differences in sex matters as much as in other affairs of life. It will not do to attempt to force all sexual temperaments into the same bed of Procrustes.

It is true that in the average case abstinence—which must be clearly distinguished from continence—does not lead to any grave disturbances of health; in the majority of instances no serious physical ill-effects result. But in saying so we have not stated the whole case. For there are some individuals, and not a few of them, in whom abstinence produces mental depression, lassitude and inability to work. Sometimes, as Professor A. Nyström has pointed out, nocturnal or even diurnal emissions will ensue from prolonged abstinence, which lead to a weakening of the sexual nervous apparatus, and may ultimately bring about impotence. Women, being more passive in their sex lives, bear sexual abstinence, on the whole, much more easily, especially if the sex passion has not been aroused in them by actual experience. Besides, frigidity—*i. e.*, a natural coldness toward sex relationship—is a much more frequent occurrence among women than among men. The female need for sex gratification would therefore be much smaller. But even here a dogmatic attitude can by no means be maintained. The erotic impulse can be largely sublimated—*i. e.*, directed into other channels of an intellectual, emotional, or esthetic nature; but there generally remains a residuum which cannot be disposed of in this manner, and often leads to unexplainable oppressive yearnings and desires, both in man and in woman. Even physical exercise, so frequently recommended as a panacea against sexual promptings, has by no means always the desired soothing effect. If not pushed to excess, thus producing general bodily exhaustion, it may, on the contrary, by the



general heightening of the vital energy, stimulate the sex centers; for these are, after all, not an isolated system of the body, but are influenced in consonance with the whole bodily tone.

But the medical aspect of abstinence is, in any case, besides the question. Our problem is not so much whether abstinence is unprejudicial to health, but whether, as a matter of fact, it is possible. Before deciding this point we must first be careful to define what is meant by "abstinence." For, according to the generally implied view, abstinence merely seems to mean abstention from sexual intercourse with the other sex. But, as Rohleder has truly remarked, have we a right to speak of abstinence if we do not exclude at the same time all other sexual practices of whatever kind? There is no doubt that sexual abstinence is often accompanied by masturbation or other perverse practices. Furthermore, it may be regarded as a rule that erotic dreams, and voluptuous reverie form the psychic counterpart of physical sex gratification in all normally constituted persons. A person not so affected would have to be classed, according to Rohleder, as an individual suffering from sexual anesthesia. Therefore, speaking of abstinence can only imply partial abstinence in the sense indicated.

If we desire to solve the problem whether such abstinence is at all possible, we must differentiate between abstinence of the male and of the female. Women, as we have already seen, are certainly less prone to become victims of violent sex impulses—at least in the earlier period of mature life. In fact, masturbation in women has been found prevalent mostly between the ages of twenty-five to thirty-five years. It is at this time, it appears, that sexual needs tend to become imperative in woman. The case stands otherwise with the male. Here all forces combine towards an early excitation of the sexual instinct. This is so much recognized as a social fact, that the problem of sexual continence may be said practically to be a male sex problem. But though the unruly sexual spirit of man is admitted as a fact on all sides, it is attributed by the orthodox sex reformers to premature and excessive artificial stimulation under conditions of civilized life. While this must be granted to a considerable extent, it nevertheless does not convey the whole of the truth. Professor Groos and others have shown that a sort of sexual play occurs even in childhood, and must be looked upon from a biological point of view as a

preparation for adult life, in the same way as other play activities of man and animals. We cannot attribute to it in the majority of cases any corrupt taint whatsoever. Sexual proclivities are also freely indulged in in a natural manner by the young of many primitive tribes, and also among the rural population of civilized countries. As Metchnikoff has pointed out, it is one of the disharmonies of human life that the sexual impulse develops in man before full maturity is reached. The impulse towards sex gratification must therefore be looked upon as natural in the same sense as any other human impulse. There is no reason to assume that it can remain in abeyance beyond a certain period of life. Nor can it make any difference to the sex instinct of a man whether he happens to be married at a certain age or not. For in both cases, if the proper age is reached, the craving for the other sex will strive for appropriate satisfaction. As Freud has said: "Experience shows that the majority of people forming our society are constitutionally unequal to the task of abstinence." And we would endorse this dictum, adding only that what we here mean by abstinence is the total suppression of the sex impulse in all its forms. This lustful propensity of the male in matters of sex shows itself in more than one way. Thus, Walter Heape speaks of the "errant nature" of the male, which constantly suggests to him the attraction of a strange female. He contrasts the roving tendency of the male, ever intent on the appeasing of his sex hunger, with the much more stable female, whose sex impulse seeks satisfaction rather in the offspring resulting from the sex process, thus supplying the main impetus for the establishment and consolidation of family life. This antithesis between the male and female expression of the sex instinct he would regard in the light of a biological law of Nature. A similar view is also taken by Professor W. Thomas, who states that "from the biological point of view monogamy does not, as a rule, answer to the condition of highest (sex) stimulation." Havelock Ellis, too, admits man's "mysterious craving for variety," which pursues him right into his married life. For we cannot avoid the unpleasant truth that irregular sex habits are not confined to the unmarried only. Among the clientèle of prostitutes a good proportion—and by no means the smaller one—are found to be married men.

The upholders of the ascetic ideal are here faced with a



fundamental fact of sex life which no cavilling will avail against. Indeed, the problem of abstinence from this point of view becomes insoluble. Instead of asking the question whether abstinence is possible, it would be much more pertinent to ask whether, if possible, it would be good. Traditional opinion looks too much upon the sex impulse as a separate phenomenon of human life which may be disregarded at will until such time as it can find proper expression in a legalized form. According to the prevailing notion, the current of sex life may be dammed up without detriment, personal or social. It assumes that the floodgates only need to be released at the appointed moment in order to yield a full and deep stream of emotion. But holding up too long Love's vitalizing power may lay barren the whole personality. We cannot shut out the most potent energizing factor of life without at the same time stunting the emotional and spiritual capacity of man. The development of the sex impulse is closely bound up with the mental growth of the individual, and its persistent disregard may cause what Nyström has so well termed a veritable "atrophy" of personality. As Havelock Ellis has pointed out: "Even if sexual relationship had no connection with procreation whatever, they would still be justifiable, and are, indeed, an indispensable aid to the best moral development of the individual; for it is only in so intimate a relationship as that of sex that the finest graces and aptitudes of life have full scope." The baneful effect of a sexless life is seen in its worst form in spinsters who, doomed to a lifelong solitary existence, so often become starved in emotion, cramped in outlook, and soured in temperament.

Abstinence, then, which does not allow for the natural growth of the erotic emotions, far from being a true ideal, must be condemned at best as an "empty virtue." Indeed, the idea of sexual abstinence is an ill-conceived notion which cannot be sustained either on physiological or on spiritual grounds. It is based on a false conception of sex morality which regards physical sex relationship as intrinsically low and brutal. We have, however, found, firstly, that the sex instinct is as natural as any other fundamental human instinct; and, secondly, that the erotic emotions form the proper basis of even the noblest and truest love. We cannot starve the one without at the same time preventing the blossoming of the other. In order, therefore, to arrive at a right solution of the problem of continence, we must recognize both



these vital elements will give us proper guidance towards a true sexual norm. Continence, instead of aiming to miss love, should rather be a disciplined cultivation of love. It is self-control which forms the central idea of chastity. As Ellen Key has so well defined it, "Chastity is harmony between body and soul in relation to love." And this harmony can only be attained by not unduly stressing either the physical or the spiritual side of love. Spiritual love without eroticism is meaningless, while, on the other hand, physical lust without the wider psychic irradiation of love is not only devoid of a real human content, but ends by defeating itself. For sexual passion, by overstepping its proper aim—the attainment of complete unity with the beloved—soon surfeits itself and gets wrecked on its own boulders. A sane use of the gifts given us by Nature, in sex matters as much as in other relations of life, is the only wholesome rule of conduct.

#### BLOCH'S VIEWS ON SEXUAL ABSTINENCE\*

There is no disputed question in respect of which the divergent views are so sharply opposed as they are regarding the importance, the value, and the consequences of *sexual abstinence*.

I distinguish *five* groups of opinion:

1. The apostles of *absolute asceticism* during the whole of life (Tolstoi, Weininger, Norbert Grasbowsky, Kurnig, etc.).
2. The medical advocates of *relative temporary continence*, until it becomes possible to enjoy permanent hygienic intercourse, free from all objections.
3. The advocates of "*duplex sexual morality*," who demand from *woman* sexual abstinence until she marries, but who regard this as impossible in the case of *man*.
4. The "*Vera*" *enthusiasts*, who on *moral* grounds demand abstinence for *both* sexes until marriage.
5. Those who *doubt* the possibility of abstinence of *any* kind for either sex, whether absolute *or* relative.

Regarding those mentioned under the first heading, who demand absolute, life-long sexual abstinence, it is hardly necessary to say a word. It is nonsense, a pious superstition, a Utopia contrary alike to Nature and to civilization, born of the belief in the "sinfulness" of sexual intercourse.

The normal sexual impulse is a *natural* phenomenon; it is

---

Dr. Iwan Bloch in *The Sexual Life of Our Time*.

pure and thoroughly ethical; and it is only in an insane confusion and in a morally reprehensible falsification of his own nature that man has come to regard it as a "sin," as an "evil." Man has a natural, inborn right to the gratification of the sexual impulse. Absolute asceticism must be rejected as a thoroughly *immoral* doctrine.

The same is true of the duplex sexual morality, alluded to under the third heading, by which that is justified to man which is denied to woman. The "morality" presupposes for man a natural impulse, and demands for him a right to gratify it, whilst the existence of such an impulse and of such a right is denied to woman. We have shown that this view is an inevitable consequence of coercive marriage morality. (Näcke and Thal as well condemn this duplex personality.)

The standpoint of the sceptics alluded to under § 5 is one which denies the possibility of *any* abstinence, even merely temporary abstinence; but this view is equally to be rejected. Man is a natural being; his sexual impulse is a natural instinct, and as such one whose existence is justified; but at the same time man is a *civilized being*. Civilization is an elevation, an ennoblement, a transfiguration of Nature, whose unduly powerful impulses and powers must be tamed and harmonized by civilization. The right to sexual gratification is therefore opposed by the *duty* to set bounds to the sexual impulse, to conduct it into such paths that no harm can result from its exercise, either to the individual or to Society; and in order that, like all other impulses, it may subserve the purposes of the evolution of civilization. To this end, however, a *relative abstinence* is of great importance (this is a matter which has not hitherto been sufficiently recognized); but this course it is only possible to follow when, at the same time, we emphatically *affirm the rightness of sexuality*, and when it is our desire to utilize it as a *civilizing factor of the first rank*. If we fail to recognize the value of *temporary abstinence*, and the importance of the storing up of sexual energy which is thereby effected, and the transformation of this energy into other energies of a spiritual nature, such an individualization becomes impossible.

Alike the medical advocates (§ 2) and the moral advocates (§ 4) of a relative temporary abstinence for both sexes have, from their respective standpoints, made a just demand. This is, in fact, in both cases an "ideal standpoint," to use the phrase of

F. A. Lange; but it is also an ideal most desirable to set before youth, and more especially before our German youth. We cannot repeat too often, or insist with too much emphasis, what an endless blessing results from the endeavor towards, and from the realization of, temporary sexual abstinence, more especially in the years of *preparation* for life, but also in the years of *independent creative work*.

The importance of *relative* sexual abstinence was first recognized by the ancient Israelites. Numerous wise prescriptions and utterances prove this. Julius Preuss, the most celebrated student of ancient Jewish medicine, has recently, in an interesting study of "Sexual Matters in the Bible and the Talmud" collected the following facts bearing on the matter:

"Chastity was a self-evident demand for the unmarried. It is true that, in view of the early occurrence of puberty, they married very young—at the age of eighteen or twenty; and Rabbi Huna is of opinion that anyone who at the age of twenty is still unmarried passes his days in sin or—which he regards as even worse—in sinful thoughts. There are three whom God praises every day: an unmarried man who lives in a large town and does not sin; a poor man who finds an object of value and returns it to the owner, and a rich man who gives his tithe secretly. Once when this doctrine was read out in the presence of Rabbi Safra, who as a young man lived in a large town, his face lighted up with joy. But Raba said to him: "It is not meant such a one as thou art, but such a one as Rabbi Chanina and Rabbi Oschaja, who live in the street of the prostitutes, and make shoes for them, to whom, therefore, the prostitutes come, and look upon them, but who, notwithstanding this, do not raise their eyes to look upon the prostitutes."

After marriage also they endeavored by valuable proscriptions to enforce the great civilizing idea of temporary sexual abstinence. Thus, intercourse during menstruation was strictly forbidden, and was regarded as a deadly sin; the same was the case as regards intercourse when there was any other hemorrhage from the genital organs; but in this case the abstinence must last even longer. It is remarkable that Catholic theologians allowed sexual intercourse without limit when such morbid hemorrhage was present, and allowed it also, with certain restrictions, during menstruation. Further, among the ancient Hebrews intercourse



was forbidden during the week of mourning for parents or brothers or sisters; it was forbidden also during the festival of atonement. Guests in an inn when traveling were also forbidden sexual intercourse, doubtless on grounds of decency. Intercourse was likewise forbidden in times of famine, in order to spare the bodily forces.

Golden sayings recognize the value of moderation and of relative abstinence.

According to an ancient Israelitish popular saying, sexual intercourse is one of eight things *which are beautiful when enjoyed in strict moderation, but harmful when enjoyed very freely*. The others are walking, possessions, work, wine, sleep, warm water (for bathing and for drinking) and venesection.

Rabbi Jochanan said: "Man possesses a little limb: he who satisfies it hungers; he who allows it to hunger is satisfied."

Rabbi Ilai said: "When man observes that his evil impulse is more powerful than he is himself, let him go to a place where people do not know him, let him put on dark clothes, let him wear a dark turban, and let him do that which his heart desires; but let him not publicly profane the name of God." This can only mean that in general he only controls the desire who has already tasted the fruit—that is to say, that abstinence is the safest means against lust; but he who, notwithstanding this, finds that the impulse threatens to become too violent, still has the duty to fight against it, and in any case not to yield immediately.

This ancient notion of relative asceticism was, unfortunately, falsified and thrust into the background by the Utopian and contra-natural idea of absolute asceticism; its great value was completely obscured by the inevitable reaction against the principle of absolute chastity. This reaction led actually to the formation of rules regarding the frequency of intercourse, such as that attributed to Luther—"Twice a week does harm neither to her nor to me"; *although it is precisely in this department of life that no rules can be given, and that the greatest individual variations occur*, so that "twice a week" may for many constitute by far too much, and can only be regarded as permissible to robust constitutions. Daily indulgence in sexual intercourse, continued for a long *period* of time, would be deleterious even to a Hercules, *and in all circumstances would be harmful to both parties*. Nature herself, by exhibiting a certain periodicity in sexual excitement

(which periodicity is admittedly far more distinct in women than it is in men, who can "always" love), has facilitated temporary abstinence. This is, in fact, a natural demand even of the most extreme ethical materialism; for, as Friedrich Albert Lange rightly points out, "even though the individual sensual pleasure, as with Aristippos or Lamettrie, is raised to a principle, *self-control* still remains a requirement of philosophy, if only in order to assure the permanence of the capacity for enjoyment." So also the poet of the "New Thanhauser" sings:

*"Happy is he who eternally desires.  
A happy man art thou, Tantalus!  
If he ever attained that for which he longs,  
He would instantly taste satiety:  
Let me have but a single grape  
From the full cluster,  
Gladly, Cytherea, will I live,  
Ever desiring, in thy courts!"*

The question of abstinence is an entirely different one, according as it relates to the time *before* or *after* the first experience of sexual intercourse. Experience shows that in the former case abstinence is far easier than it is when the forbidden fruit has once been tasted. If, with the author of this book, relative asceticism is regarded as the most desirable ideal, we shall endeavor in *youth* to realize that ideal for as long a time as possible, *without* any interruption by sexual intercourse; whereas in the later period of the fully-developed sexual life we shall practice sexual abstinence only from time to time.

With regard to the former point, it would be the greatest good fortune for every man if he could remain sexually abstinent until the complete maturity of body and mind—that is, until the age of twenty-five. But this is in most cases an impossibility. Yet it is *possible* for *every* healthy man—and it is an imperative demand of individual and social hygiene—to *abstain completely from sexual intercourse at least until the age of twenty*. That is possible without any harm resulting, and it is carried out by innumerable persons of both sexes. It is, indeed, a fact that in civilized countries the physical and mental maturity of girls and boys by no means coincides with their sexual maturity, but, on the contrary, occurs from three to five years later. First between the

ages of twenty and twenty-two does man attain complete development. If the sexual impulse is not artificially awakened and stimulated during these years of adolescence, it may remain very moderate, without masturbation and without pollutions, and can be easily controlled. Relations with the other sex have not yet become necessary for the development of the individual personality. The human being has still enough to do in isolation. First with the commencement of the third decade of life do the conditions alter, and sexual tension becomes so great as to demand the adequate and natural discharge given by the normal sexual act. If this is impossible, pollutions form the natural, or masturbation forms the unnatural, outlet; and when abstinence is continued for a long time after attaining this age, the vital freshness and the spiritual and emotional condition are more or less impaired. To have emphasized this fact, in opposition to those authors who declared that total sexual abstinence is absolutely harmless to mature men, was the great service of Wilhelm Erb, the celebrated, widely-experienced Heidelberg neurologist.

"It is a well-known fact," he writes, "that healthy young men with a powerful sexual impulse suffer not a little from abstinence, that from time to time they are 'as if possessed' by the impulse, that erotic ideas press in upon them from all sides, disturb their work and their nocturnal repose, and imperiously demand relief. I always remember the remark of a friend of my youth, a young artist, who, when speaking of these things, was accustomed to say with intense meaning: 'Who has not passed a mournful night weeping in bed?' And the same man could not sufficiently extol the relaxing disburdening, and positively refreshing influence of an occasional gratification; and the same thing has been said to me innumerable times by earnest and thoroughly moderate men."

Women also gave him similar assurances. In numerous cases Erb observed physical and mental harm to result from abstinence—sometimes in healthy individuals, but more especially in the neuropathic.

Important also are the investigations of L. Lowenfeld regarding the influence of abstinence: He found that in men under the age of twenty-four any troubles worth mentioning as a result of sexual abstinence were comparatively rare, as compared with the case of men between the ages of twenty-four and thirty-six years,



the years of complete manly power and sexual capacity; and he found that whereas in healthy persons these disturbances were indeed of a trifling character (general excitability, sexual hyperesthesia, hypochondriacal ideas, disinclination for work, slight attacks of giddiness), in neuropathic persons, on the contrary, there would occur coercive ideas, melancholy, feelings of anxiety, and even hallucinations. Females, according to Lowenfeld, bear abstinence—even absolute abstinence—much better than men, but in them also hysterical and neurasthenic conditions may develop as a result of sexual abstinence.

All these harmful consequences of abstinence are, however, neither in man nor in woman, of such a nature that, where an opportunity for sexual intercourse at once hygienic and free from ethical objections is wanting, the gratification of the sexual impulse need be advised by the physician as a “therapeutic measure.” No; Erb himself insists that, on the contrary, the dangers threatened by venereal diseases *altogether outweigh* the comparatively rare and trifling injuries to health resulting from abstinence. “Extra-conjugal” sexual intercourse involves the dangers of syphilitic or gonorrheal infection, or of illegitimate pregnancy, which latter to-day must, unfortunately, be regarded as a kind of severe disease. In contrast with these evils, any harmful consequences of abstinence fade away to nothing.

Later in life, when the possibility of a permanent pure love exists, the value of temporary abstinence is to be found especially in the spiritual sphere. Precisely for the “erotocrat,” as Georg Hirth terms one endowed with a powerful and healthy sexual impulse, is this temporary abstinence of a certain importance, because the stored-up quantum of sexual tension re-enforces the inward spiritual productivity. A number of men, at once endowed with strong sexual needs and with a noble mental capacity, have assured me that, in consequence of abstinence, they have temporarily experienced a peculiar deepening and concentration of their mental capacity, by means of which they were undeniably enabled to increase their mental output. This point in the hygiene of intellectual activity, which seems not to have been unknown to Goethe, has been as yet too little studied.

In any case, it is definitely established that from the standpoint of civilization the idea of sexual abstinence is justified, if for this reason alone: Because in it we find a great means for

increasing and strengthening of the will; but, in the second place, because in it we have a valuable protection against the dangers of wild love; and, finally, because sexual abstinence emphasizes the fact that life contains other things worth striving for besides matters of sex, that the content of life is far from being exhausted by the sexual, even though the sexual impulse, in addition to the impulse of self-preservation, will always remain the most powerful of all vital activities.

The question *whether impotence can result from sexual abstinence* is still disputed. Fürbringer does not know of any certain cases. According to Virey, by "complete and continuous abstinence from intercourse" in the male the organs by which the semen is prepared—the testicles, the seminal vesicles, and the vasa deferentia—and also the penis, become smaller, "unsightly, wrinkled, and inactive." Galen reports the same of the athletes of the Roman Empire, men who had to live a life of strict continence. Virey alludes to an "extremely chaste saint, in whom after death no trace of genital organs could be discovered" (!). That absolute abstinence must ultimately limit potency, if only by psychical means, is *a priori* probable.

Recent observations confirm the view that long-continued absolute sexual abstinence exercises a harmful influence upon potency, and especially upon *potentia coeundi* [possibility of copulation]. As a proof of this, I may more especially mention two cases of University professors, not yet thirty years of age, both of whom until a little while ago had had no experience of sexual intercourse, one having remained continent during two years of married life! Quite recently both of them repeatedly attempted normal coitus, but with complete failure *quoad erectionem* [inability to have erections]. Von Schrenck-Notzing also reported a case of this character not long ago, in which, notwithstanding the strong desire for normal sexual intercourse, in the case of a literary man thirty-five years of age, who prior to marriage had lived a life of *complete abstinence*, and had never practised masturbation, every attempt at coitus proved a failure.

Finally, we have to consider the more or less physiological *presenile and senile impotence* which accompanies the commencement of old age, but naturally occurs at very different times in different individuals, for some men are already old at the age of forty years, and others are not yet old at the age of seventy

years. Von Gyurkovechky dates the first decline in the sexual powers from the fortieth year of life, and considers that normally these powers are completely extinguished at about sixty-five years. But there are numerous exceptions. Complete potency in respect of desire, erection, and ejaculation has been observed in men of seventy and eighty years; and isolated cases have even been recorded in which men of ninety and one hundred years have procreated children. In the sense of Metchnikoff and Hirth, who in their writings proclaim the prevention of senility as a hygienic ideal, this physiological *potentia senilis* [potency of old age] is no Utopia, and a future scientific macrobiotic will defer the onset of old age by from ten to twenty years.



## CHAPTER V

### MASTURBATION

SELF-ABUSE; SOLITARY VICE; SELF-RELIEF (ONE FORM OF AUTO-EROTISM OF HAVELOCK ELLIS.)

**I**N THE MALE.—By masturbation is understood producing the venereal orgasm, whether accompanied or not by emission of seminal fluid, through any artificial means whatsoever; that is to say any means besides the sexual union. (Before proceeding any further I wish to state that *onanism is not masturbation*. The practice referred to in Genesis, xxxviii, 8, 9, 10, was “withdrawal,” and is referred to in Sex Facts for the Married.)

It is sometimes asserted that masturbation is confined to human beings, and in them is not found among savages. Neither of these assertions is correct, as many observant farmers and animal keepers could testify for the first part, and travelers for the second part.

Among wild animals it has been noted in elephants, camels, stags, etc., and among domesticated ones, dogs, stallions, goats, sheep. Even parrots are sometimes addicted to the practice, and cock-turkeys are said to make use of round stones. Stallions—especially of some breeds—are great offenders, and several years ago we remember reading of a man who intended to bet on one in a race, but incidentally learned from the groom that the animal was given to this practice, so he refrained, and when the race was run, the stallion finished “a poor last.” Goats sometimes excite themselves with the aid of the mouth, as in a case in Chicago quite a while back.

Monkeys, however, are probably the best examples among animals and everyone who has frequented parks or zoological gardens must have noticed this. Some specimens are particularly prone to this if a woman approaches, and it is suspected in such cases they are menstruating, and the animal is aware of the fact. Whether we inherited the practice from our simian ancestors or not, it is of very respectable antiquity, for the story goes that Diogenes, the famous Greek cynic, who lived in the 3d century

before Christ, used to masturbate on the street corners of ancient Athens to show his contempt for womankind.

The inhabitants of Tierra del Fuego, the island at the extreme end of South America, are generally considered to be the lowest human beings now on earth. Despite the inclement and stormy weather which prevails there practically the whole year round, they have no clothing save an animal skin strung about them, and worn on the side from which the wind happens to blow. Their food is eaten raw, and their dwelling places—or dens rather—are as primitive as their clothing, yet their jargon, rude as it is, contains a special word for masturbation.

Without much exaggeration masturbation may be said to be practiced “from the cradle to the grave.” Children in the first few months or years may commence, the cause often being some irritation about the genital organs set up by too long a foreskin, pinworms in the lower bowel, etc. Ignorant or vicious nurses are in the habit of quieting fretful infants by rubbing the genitalia. When a little older the boy has occasion to handle the male organ when passing water. Dr. Jacobi years ago, pointed out that “the young child is but clumsy and the reverse of adroit. It takes him time to disentangle the organ.” We read a great deal about “Wise Mother Nature,” “Good Old Mother Nature,” and so on, but this necessity of handling the organ every time there is a call to empty the bladder scarcely strikes one as a wise provision. Still older boys may be taught by their companions, but it is quite likely a good proportion find out for themselves by sliding down the banisters and ropes, or by the characteristic juvenile habit of climbing trees.

Estimates as to the frequency vary from 23 to 100 per cent for both sexes. Out of eight series (4 males and 4 females) of persons questioned by as many observers in this country and abroad, there were 1,162 males, and 251 only of these denied the habit, while the denials could probably safely be discounted to a considerable degree. For the females, the figures were a little better, 307 admissions and 176 denials.

As regards the evil-effects of this “ravishing with the hand”—for that is the meaning of masturbation in English—authorities group themselves into two classes: Those asserting that all kinds of horrible physical and mental disturbances result, and those claiming the picture is overdrawn. As usual, the true state of

affairs is somewhere between these two extremes. In the first class the leading exponents are two authors, Swiss and French, who date back to 1760 and 1836 respectively, and their harrowing details have been translated and copied from one author to another down to the present day.

The list of ills is a long one—headaches, loss of memory, paralysis, indigestion, affections of the blood vessels, epileptic fits, asthma, coughs and various eye diseases, to cite but a few out of over one hundred given some years ago by a French author. In fact, masturbation has been blamed for disturbances of nearly every one of the organs of the body.

Of late the tendency is to make a closer distinction between the cases, thus when an unusually stupid boy proves to be a victim, it is thought he persists *because he is stupid*, not that his sluggish mentality is the result of the practice. Other things being equal, it is not clear why discharge of the seminal fluid should be any more weakening when produced artificially than when done in the usual, natural manner. Of course, masturbation is much easier than intercourse, instead of a partner of the opposite sex and some suitable couch, all that is necessary is a few moments' solitude. Hence there is a great tendency to indulge at too frequent intervals; moreover, while normal sexual congress demands an erection of the penis before penetration into the female can take place, masturbation is perfectly possible in the soft, flaccid state of the organ.

The late Sir James Paget, a famous English surgeon, wrote: "Masturbation does neither more nor less harm than sexual intercourse practised with same frequency, in the same conditions of general health, age, and circumstances."

So too, the late Dr. J. N. Hyde, a noted specialist of Chicago in his day, claimed masturbation is merely a bad habit "like picking the nose." The Doctor, in his early days, was a surgeon in the U. S. Navy and seeing how frequent this practice is among sailors, must have been thoroughly familiar with its effects.

Some years ago, Sudduth came to the conclusion that masturbation, is, in the main, practiced for its sedative effect on the nervous system. The relaxation that follows constitutes the real attraction of the act.

A recent English author—Menzies—quotes as follows: "Modern, clinical psychology, has, for instance, definitely estab-



lished the fact that autoerotism in one form or another, is a normal and quite universal phase of human development, and not, as used to be thought, an abnormal perversion of the sexual instinct."

Moll, as the result of many years' experience concludes that "even in children, masturbation does not necessarily do any harm" (*"Sexual Life of the Child"*).

A New York specialist in nervous diseases tells us: "There is no actual slow deterioration of the intelligence; insanity and idiocy are not the usual effects; and there are no characteristic changes of facial expression nor of bodily posture branding the habitual indulger." (*Starr, "Adolescent Period."*) And another specialist, this time from Switzerland, states: "The effect of moderate masturbation in the adult has been greatly exaggerated, either by confounding the effect with the cause, or for mercenary objects, by driving timid persons to charlatans or to prostitutes." (*Forel, "The Sexual Question."*)

Finally, W. J. Robinson, the well-known sexologist of New York, says in his characteristic and vigorous style: "The evil results of masturbation have been shamefully and stupidly exaggerated, and in the vast majority of cases masturbation leads to no disastrous results, and it is better for a man who cannot satisfy his sex instincts naturally to indulge in occasional masturbation than to fight day and night with his thoughts, and use up his strength in mastering his desires." (*In "Sexual Truths," see Adv. last page.*)

**Masturbation in the Female.**—It seems to be agreed that after puberty females are more given to the practice; once young manhood is reached, males have many ways of gratifying their sexual propensities, which are difficult or impossible for the other sex. Before the days of sewing machines run by power, it was a common occurrence for the operators in factories using the feet for motive power to experience an orgasm from the constant friction of the thighs, and this excited no comment being looked on as part of the daily labor. When bicycle riding first began, the high peaks of the saddles for women set up so much irritation there was a protest from physicians, as a consequence the modern saddle of flat type came into use.

As we have seen (under Reproductive Organs) the external opening of the urinary channel in females is located just below

the clitoris, as a consequence, objects used for the purpose of masturbation, frequently escape into the bladder, and the various types which have been extracted from the urinary reservoir form an extraordinary collection. Nearly every object of appropriate size and shape has been resorted to. There is no space for a complete catalog, but among there are knitting- and crochet-needles, pencils, penholders, toothbrushes, and—of course—hair-pins.

Again, some objects too large to pass through the urethra, may become ensconced in the birth canal, and owing to their greater size, candles, etc., make a still more extraordinary collection.

#### THE HABIT OF MASTURBATION\*

Masturbation or self-abuse is a term applied to a bad habit which consists in handling and rubbing the genitals. It is a bad habit because it is apt to injure the health and future development of the child. The more frequently it is practiced, the more injurious it is. It is more injurious than when practiced by boys, because the effects are usually more permanent. Girls who indulge in the habit of masturbation to excess not only weaken themselves, become anemic and get a dingy, pimply complexion, but they lose their desire for normal sexual relations when they grow up, and are unable to derive any pleasure from the sexual act when they get married. In fact, many girls who masturbated excessively get a strong aversion to the normal sexual act, and their married life is an unhappy one. Their husbands often have to ask for a divorce. Fortunately, the habit is much less widespread among girls than it is among boys. While about 90 per cent of all boys—nine out of every ten—masturbate more or less, only about 10- or at most 20 per cent of girls are addicted to this habit. But whatever the percentage may be, the habit is an injurious one, and if you value your health, your beauty and proper growth and mental development, you should not indulge in it. If you are already indulging, if you are used to handling your genitals, if a bad companion has initiated you in the habit, you should give it up. And mothers should watch their children, guard them against developing the habit, and do everything possible to cure them of it, if prevention comes too late.

---

\* Dr. William J. Robinson in *Woman: Her Sex and Love Life*. Critic and Guide Company, New York City. (See advertisement last page.)

But while, as you see, I do not deny the evil effects of masturbation, it is necessary to state that a great change has taken place in our opinions on the subject, and it is but right that parents should know of this change of opinion among the medical profession, particularly among those who specialize in sexology.

**Wrong Behavior of Parents.** When parents make the “awful” discovery that their child is fondling its genitals or is indulging in masturbation, they feel as if a great calamity had befallen them. They could not feel worse if they learned that the child was a thief or a pyromaniac. Imbued with the medieval idea of the “sinfulness” of the habit, as well as its injuriousness, they begin to scold the child, to frighten it, to make it believe that it is doing something terrible, that it has disgraced them and itself; and they try to persuade it that, unless it stops immediately, the most direful consequences are awaiting it. *The results of this mode of procedure are disastrous—much more so than is the masturbation itself.*

Often the scolding and the exposure of the child are done in the presence of others. This implants in the poor child a sullen resentment that only makes it more difficult for it to break the habit. When the child is brought to the physician, you can see by its behavior, by its downcast looks, by its sulkiness, by its attempts to refrain from tears, and other signs, that it regards the physician in exactly the same light as a youthful criminal regards the judge before whom he has been brought for trial.

It is time, high time, that this silly and injurious attitude towards a practice, which is very common, is radically changed. It is time that parents and physicians learn that the injuriousness of the habit has been greatly, grossly exaggerated. It is time that they know that the vast majority of boys and girls get over the habit without being much, or any, the worse for it. The knowledge of this fact will not only save them and the children much needless anguish and suffering, but will make it much easier to deal with the latter, make it much easier to get them divorced from the habit.

If we look at the matter in a sensible, common sense way, and do not tell the child caught in the practice that it has done something disgracefully vicious and criminal, but speak to it kindly and tell it that it is doing something that may injure it greatly, that may interfere with its future mental and physical



health and development, then we shall have far greater success in our endeavors to break the boy or the girl of the habit of masturbation.

In my opinion, stigmatizing even the most moderate indulgence in masturbation as a vice has a deleterious effect upon the people who so indulge and makes it harder for them to break off the habit. Every thinking physician and sexologist can tell you that picturing the masturbatory habit in too lurid colors and stigmatizing it with too strong epithets has, as a rule, the contrary effect to the one expected. The victims of the habit consider themselves degraded, irretrievably lost. They lose their self-respect, and it is, on account of that, harder for them to break themselves of the habit.

We shall accomplish a good deal more with our youthful and older patients if we leave alone, altogether, the moral side of the question—if there be any moral side to it—and emphasize the physical injuriousness of the habit. We do not want to diminish the self-respect of our boys and girls, we want to increase it; and we can not do this if we make them believe that a masturbator is a vicious criminal. Inspire your patients with confidence, tell them that indulgence in the habit jeopardizes their future growth, both physical and mental, their health and happiness, and you will find them easier to control.

I am not trying to minimize the danger of masturbation, for, if indulged in from an early age and to great excess, the results *may* be disastrous. But, even if I were to minimize the evil consequences, that would be less of a sin than to exaggerate them the way it has been done for so many years, by so many people in the profession and out of it. The evil results of exaggerating the influence of masturbation have been so great in the past that, if now the pendulum were to swing to the other extreme, I am sure it would not be a bad thing at all.

To deal with the subject of the *treatment* of masturbation belongs to a medical treatise. But, a few remarks on how to prevent children from acquiring the habit of masturbation will not be out of place.

**Prevention of the Habit of Masturbation.** The keynote of preventing the habit is, carefully to watch the child from its earliest infancy. We know that not infrequently stupid or vicious nursemaids, wet-nurses, and even governesses, ignorantly or

deliberately induce the habit in children under their charge. This, of course, must be prevented. Even children of the age of nine, ten, eleven years should not be left alone, but always be under supervision. Too close friendship between boys or girls, particularly of different ages, should be looked upon with suspicion.

A number of children never should sleep in the same room without supervision by an older person.

The sleeping together of two in the same bed, whether it be two children or a grown person and a child, should not be permitted under any circumstances. I admit of no exceptions to this demand. It makes no difference whether the other person is a mother, a father, a brother or a sister. Leaving out of the question any *deliberate* element, the thing is dangerous; for, very often, unintentionally, unwittingly, masturbation, is initiated by this intimate contact.

The child—boy or girl—should sleep alone, on a rather hard mattress. The covering should be light. A coverlet may be put over the feet. The child always should sleep with the arms out upon the cover or blanket, never *under* the same. If this is done from childhood on, it is very easy to get used to this way of sleeping, and many a case of masturbation will thus be obviated. The child should not be permitted to loll in bed; it must be taught to get up as soon as it awakes in the morning. The general bringing up must be of a strengthening, hardening character; and this applies both to the body and the will. When the children reach the age of nine, ten, eleven, twelve or thirteen years (we must use discrimination and judgment, for, some children of nine are as developed as are others of thirteen), we must tell them that it is bad and injurious to handle one's genitals, and we must warn them to shun any companions who wish to initiate them into any manipulations of these parts or who show any inclination to talk about sexual organs and sex matters.

Hot baths are very injurious for young children in their influence in this direction. There is no question that a bath has a very decided stimulating effect upon the sexual desire of adults as well as of children, both male and female; in fact, I have had several patients of either sex tell me that their first masturbatory act was committed while they were in a hot bath. Of course, the

sensation having been pleasurable, they kept on repeating the experience.

Every factor liable to give rise to the habit should be removed. Thus, for instance, eczema about the genitals, strongly acid urine, seatworms, and the like, should be treated until cured. That anything having a tendency prematurely to awaken the sexual instinct should be rigorously avoided, goes without saying.

**Mental or Psychic Masturbation.** Some girls and women will abstain from handling themselves with their hands (manual masturbation), but will practice what we call mental masturbation. That is, they will concentrate their minds on the opposite sex, will picture to themselves various lascivious scenes, until they feel "satisfied." This method is extremely injurious and exhausting and is very likely to lead to neurasthenia and a nervous breakdown. You should break yourself of it, by all means, if you can. For it is even more injurious than the regular habit.

#### THE PSYCHOLOGY\*

Among the many problems arising out of sex and demanding attention in the interests of the physical and moral well-being both of the race and the individual, not least is that presented by the phenomenon of masturbation.

As all who have undertaken the office of counselling others in this matter know, it is a common experience to find that the physical and moral remedies proposed fail in their purpose again and again, with the result that the unfortunate victims of the habit, wellnigh driven to despair by frequent lapses and the defeat of good intentions, are sorely tempted to abandon their struggle, and, if of a religious temperament, to forsake the practice of religion altogether. It is worth while enquiring why this should be so, and why it is that the traditional methods of treating masturbation by stern admonitions, the recommendation of special religious considerations or exercises, and, perhaps, by punishment, etc., so often seem to defeat their own ends. It is the claim of psychoanalysis to throw some light on this question.

*The problem is largely one of psychology, for, as most modern writers of repute are agreed, pathological results where they follow masturbation are more often to be sought in the mind rather than in the body of the masturbator.* Beside the pitiable

---

\*By K. Menzies.



state of mental conflict and consequent psychoneurotic misery attending excessive indulgence in these activities primary physiological results pale into insignificance, a state of affairs almost entirely ignored by most "purity manuals," which not infrequently hint at a physical disintegration and collapse, nearly akin to the final stages of acute syphilis as the Nemesis that waits upon the masturbator.

As demonstrated by Dr. Freud of Vienna, the first elaborator of the psychoanalytic technique, it is altogether too narrow a definition of masturbation to limit its meaning to the one specific action of inducing orgasm and seminal ejaculation by manipulation of the genitalia so common at puberty and in adult life. Masturbation—the self-production of erotically tinged and voluptuous sensations—must be taken to include a much wider series of phenomena than this, and may be recognized in many individuals, if not in all, at an age when physical immaturity renders impossible the climax alluded to above. Following Havelock Ellis, such activities are classified under the term "autoerotism."

Classifying all these bodily centres where excitation of the skin or mucous membrane procures voluptuous sensations as "erogenous zones," Freud points out that obviously no seduction is necessary to awaken the sexual life of the child: such awakening may come in spontaneously from inner sources. Havelock Ellis concurs: ". . . there appears," he remarks, "to be no limit to the age at which spontaneous masturbation may occur." However, for the benefit of those to whom the association of sex with infancy appears a shocking or wicked idea, it may be pointed out that the authorities quoted do not contend that the child is aware of the nature and significance of the pleasure it seeks and obtains. If a thing is "nice," the child will seek it, asking no questions and indeed imagining none. An inherent or congenital "morality" is not to be expected, and the child will continue to regard its pleasures and self-explorations as pure and innocent until, under the influence and pressure of education and cultural morality, it is taught to regard them as prurient. An "erotogenic" (erogenous) or pleasure-yielding zone having been selected thus, the child is satisfied with its manipulation until at puberty, or earlier in precocious children, the genital zone asserts its primacy and the process of synthesis is brought to completion.

Masturbation, then, in the broad sense of the excitation of erotogenic zones for the purpose of procuring pleasure, is thus found to include a wider series of phenomena than the one specific action usually understood by the term. Hence any estimation of the moral responsibility attaching to this later manifestation must, if it is to be logical and just, take into consideration the fact that in the "self-abuse" so common in adolescence we have the development of something that has its roots far back in infancy and deep down in the individual's "unconscious," where, as psychoanalysis shows, many unsuspected memories and many trends and impulses repressed under the exigencies of cultural education are treasured.

Thus the child, remembering a pleasurable sensation and always casting about for expedients and methods which will procure its repetition, will, on the discovery of the genitalia and the enormously enhanced pleasure obtainable from their manipulation, normally forsake the old and now inadequate erotogenic zones and fasten on the new, being already predisposed to masturbatory activity by past experiences, and further incited to it now by the facility and higher degree of pleasure obtainable. Such discovery of new fields for pleasure may, of course, result from direct initiation or seduction by others, but not less frequently through self-exploration, curiosity, or accidental experiences such as pressure of clothing, sliding down banisters, riding, cycling, friction of the towel after bathing, and so forth.

"Normally," observes Havelock Ellis, "there appears to be a varying aptitude to experience the sexual orgasm or any voluptuous sensations before puberty. I find, on eliciting the recollections of normal persons, that in some cases there have been voluptuous sensations from casual contact with the sexual organs at a very early age; in other cases there has been slight excitement from early years; in yet other cases complete sexual anesthesia until the age of puberty."

From the biological standpoint masturbation is undoubtedly unnatural, but so, perhaps, not so much in its methods as in the fact that its aim is the gratification in solitude of an inherent impulse obviously social in its reason for being and intended to secure the reproduction of the species. It is, no doubt, to this biological unnaturalness that the moralist will point as the source of what self-reproach which so often follows upon indulgence. But if the unnaturalness of any action necessarily constitutes



immorality—the secret realization of which gives rise, as is alleged, to anxiety and remorse—we might consistently expect a similar effect to follow all of the many biologically unnatural habits and practices to which mankind is addicted, an expectation which is not fulfilled.

By the provision of Nature the reproductive organs are closely situated to those which perform the duty of excreting waste matter from the alimentary system. Quite naturally the at first egocentric interest of infants and little children becomes fastened upon these functions and preoccupied with them—interest which is heightened and stimulated by the pleasurable sensations attending defecation and micturition. The first step in the child's education consists in weaning it from exclusive self-interest and such unesthetic preoccupations to interest in other persons and observance of the canons of decency. Here, then, begins a conflict between curiosity and voluptuous preoccupation with excremental functions on the one hand and the general social valuation of such interests on the other. The child begins to learn shame and disgust at matters which once occupied its deeply interested attention. It is taught that certain parts, organs, and functions of the body are not mentioned in polite society; that it is "dirty," "naughty," and deserving of punishment to allude to them or display them in public. Thus in the childish mind, intensely receptive in its attitude towards parental prohibitions, the idea of unlawfulness becomes definitely associated with the old activities and interests.

Again, "the organized conspiracy of silence" (*i. e.*, on the proper function of the sexual organs and the physical differences between the male and the female) "is soon noticed by the child, and he is subjected to a mass of suggestion, all the more potent for being indirect, which teaches him that the whole subject is taboo, mysterious, improper, peculiar, and essentially wicked. Those who object to direct enlightenment, therefore, should recognize that they are really defending a false enlightenment, a positive teaching of shame and guilt." Pfister is equally emphatic: "If the child is not instructed from the authoritative side, the street takes up the task, often in the dirtiest form. That which should be the object of reverence is painted as ugly and subjected to obscene jests.

The appearance of such phenomena as feelings of shame and



disgust, etc., as counter-impulses or reactions to the primitive tendencies of the first and non-moral stage of the infantile life, or at any rate the development of capacities for their formation, is found to mark, at about the third year, the beginning of a second stage in the psychosexual life the child, known as the "latency period." The extent to which actuality may invest such spontaneously appearing capacities for response or reaction will largely depend upon the nature and type of the environmental and educational influences that surround the child. Where circumstances favor their development, the newly appearing impulses tend towards the inhibition of the first group, as, for example, a feeling of displeasure or embarrassment attaching to activities and situations formerly wholly pleasurable. Interest in the unesthetic is gradually repressed under a growing tendency to repugnance, and before the pressure of the new counter-impulses the old disappear from view. The inception of such repression is the inception of the unconscious.

Later contributions to the ego-ideal arise from the desire to be thought well of and approved by the powers that be, human or Divine; to be loved, admired, and respected by the external realms of earth and heaven.

Through bringing or attempting to bring the self into harmony with the specifications of the ego-ideal is achieved self-respect, self-esteem, and moral consciousness. If disparity is perceived between the self and the ideal, the ungratified tension comes to perception in the familiar feelings of shame, guilt, and degradation.

It is pointed out by Frink that though "the term 'conscience,' as it is ordinarily used, implies an endopsychic censorship which deals with moral matters almost exclusively, the ego-ideal contains many other specifications than merely moral ones, and self-satisfaction has other components than simply moral self-content. Our self-satisfaction is disturbed quite as much by non-moral disparities between the ego and the ideal as by strictly moral ones, and in either case the libido is freed in just the same way, and the type of displeasure experienced has essentially the same quality. To use the wrong fork at a formal dinner, to pass flatus in public accidentally, to make a serious mistake in diagnosis, or to have on dirty underwear, are not matters that can be classed as sins, though in certain circumstances they can produce a sense

of shame and humiliation which has no essential qualitative difference from that produced by actions which the individual does regard as sinful and immoral. We are apprised of incompatibility between a wish or contemplated action and the esthetic, ambitious, or grandiose specifications of the ego-ideal apparently in just the same way and by just the same function as that which applies in matters ethical. It would seem, then, not only convenient but justifiable to broaden the term 'conscience' to include not only that which measures the self according to the purely ethical terms of the ideal, but also that which does all such self-measureings, whether they be according to moral, esthetic, ambitious, patriotic, or any other variety of ego-ideal specifications."

*Sexual Tension.*—With the important physical changes attending puberty fresh considerations come into view.

Speaking of this period, Dr. Ernest Jones points out that "The psychosexual life of children differs from that of adults in three main characteristics—in the different nature of the pleasure experienced, in their relative independence of outside persons for this (autoerotism), and in the fact that they obtain pleasure from much more manifold sources and yet in much less differentiated ways than do adults. At puberty important changes take place in all these respects. The excitations, mechanical and other, that gave satisfaction to the child's desires now come to contain a disagreeable component due to the feeling of tension experienced. They thus constitute merely a "fore-pleasure" which impels to further activities destined to produce the "end-pleasure" that relief of tension brings about.

"One would thus be forced to the assumption," writes Freud, "that the accumulation of the sexual substance produces and maintains the sexual tension. The pressure of these products on the walls of their receptacles acts as an excitant upon the spinal centre, the state of which is then perceived by the higher centres, which then produce in consciousness the familiar feeling of tension." "For me," he states in a previous passage, "it is conclusive that such a feeling (*i. e.*, tension) carries with it the impulse to alter the psychic situation, and acts incitingly."

In continent lives this over-accumulation of the sexual products commonly terminates in a mechanical discharge or overflow—the phenomenon known as "pollution," occurring at changeable but not entirely capricious intervals, and this brings about a sub-



stitute for the sexual act (*i. e.*, the normal) by a short hallucinatory road. But sexual tension occurs far more frequently than do pollutions, and once the individual has discovered that masturbation also affords the desired relief, he is less likely to wait for an emission, since by the practice wherewith he forestalls it he is able not only to prolong the pleasure that accompanies the discharge of the sexual substance and to procure it at will, but also to avoid the inconveniences, discomforts, and humiliations sometimes concurrent with pollutions during sleep.

It is contended by some that those to whom relief by normal outlet (*i. e.*, marriage) is denied should rest content with what they term "a natural provision." But it is, of course, purely hypothetical to speak of emissions dogmatically as a "provision of Nature," with the implication that they are arranged for beneficent and ethical reasons. It would seem that they are rather a harmful consequence of the repression of a natural impulse, and no more a good substitute than the bursting of the bladder or paralysis of the sphincter muscle with outflow of urine would be a substitute for urination; for it must be evident that nocturnal pollutions necessarily involve a greater exhaustion to the nervous system than masturbation, seeing that the process is entirely psychical, whereas in the latter case the mechanical stimulation of the genitalia at least, and perhaps the vision of the desired object, either actual at the moment or fresher in the "mind's eye," assist towards the climax, and offer some analogy to and a nearer reproduction of the circumstances attending normal coitus.

In connection with the question of the relief of tension, Havelock Ellis states that his own conclusions anent the sedative effect of masturbation are fully in harmony with those of Prof. Sudduth, who suggests that "masturbation is, in the main, practised for its sedative effects on the nervous system. The relaxations that follow the act constitutes its real attraction. . . . Both masturbation and sexual intercourse should be classed as typical sedatives." Haig has sought to find the precise mechanism of this phenomenon in the blood-pressure. "As the sexual act produces lower and falling blood-pressure," he remarks, "it will of necessity relieve conditions which incline to high and rising blood-pressure, such, for instance, as mental depression and bad temper; and, unless my observation deceives me, we have here a connection between conditions of high blood-pressure with mental and bodily



depression and acts of masturbation, for this act will relieve these conditions and tend to be practised for the purpose." Such a result may become discoverable to adolescents, and the present writer has a distinct recollection from his school-days of a French lad of about 17 advocating resort to masturbation for the relief of headache.

The sedative effect of masturbation, however, is most agreeably marked, perhaps, in the psychic sphere, especially in the case of those whose sense of chastity is offended by sexual longings and phantasies, and who feel themselves exhausted by perpetual efforts to combat such. That a period of relief from such mental disturbances and conflicts invariably follows in some measure upon an indulgence is undoubtedly true, and unless there is exceptionally strong will-power or some powerful motive for self-restraint, a tendency to take the line of least resistance will probably assert itself in most cases.

#### THE PATHOLOGY

It appears to have been an anonymous work entitled "Onania, or the Heinous Sin of Self-pollution, etc.," published in the eighteenth century, which first called attention to the supposed terrible results of this practice; and various works, pamphlets, etc., have from time to time been published since in the same strain.

A long list of the alleged symptoms or consequences of masturbation is given by Havelock Ellis (with the authorities for them), who admits that many of these manifestations do unquestionably occur in connection with the practice, but qualifies this admission with the proviso "that there is good reason to believe that some of them may be the results of masturbation acting upon an imperfectly healthy organism, there appearing but little reliable evidence to show that simple masturbation in a well-born and healthy individual can produce any evil results beyond slight functional disturbances, and these only when it is practised in excess."

Modern authorities are of the opinion that masturbation *per se*, where it is practised in moderation, is followed by no pernicious results worthy of serious attention, and certainly not by the disaster to physical health so often hinted at—it being an obvious truth, as Ellis points out, that "it makes a considerable difference whether you throw a lighted match into a powder magazine or into the sea."

On the other hand, however, *there are, as we have observed, numerous well-intentioned writers, whose high ethical purpose is not disputed, to be found among those who attribute an almost unlimited and terrifying host of evils to the practice.* But it would seem, at any rate with some of them, that in their zeal to censure a practice which accepted conventions condemn on other grounds, they have tended to overlook the above truth stated by Ellis, and formed their judgments as to the general effects of masturbation from their observation of special cases where the habit has existed in alliance or complication with other disorders, and may well be a symptom and not the cause of neurotically disposed constitutions.

However, although it may be conceded generally that moderate masturbation is, other things being equal, comparatively harmless, it will none the less be found that, like excess in all other artificial habits and practices, intensive masturbatory indulgence may be—and often is—distinctly injurious.

From the sociological point of view more serious results may be indicated. Jones points out that in the case of the female “persistence of clitoris masturbation is one of the most important agents leading to anesthesia, because it means fixation on the infantile, male form of sexuality, and so prevents the development of the adult feminine form—namely, vaginal sensibility. The circumstance that the primacy among the various erotogenic zones has in the case of the female to pass over from one region to another during the transition from girlhood to womanhood—namely, from the clitoris to the vagina—whereas it remains throughout life in the same region in the case of the male, is one fraught with potential difficulties for the normal development of the sexual instinct in women, and is perhaps the main reason why neurotic deviations are commoner than with men. It is, for instance, closely bound up with the problem of homosexuality in women, components the exaggeration of which play a comprehensible part in the production of anesthesia. This anatomical transition, from the clitoris to the vagina, is almost comparable in importance to the psychological transition from the infantile sexual object in the family to the adult object—namely, the lover; but whereas men have to deal only with the difficulties of this latter transition, women have to deal with those of both, to change their object and to reverse their sexual attitude. That is so in



any event, but the difficulty is materially increased in cases of prolonged clitoris masturbation, which makes it harder to renounce the infantile attitude that is bound up with the sensations derived from the clitoris."

In view of the general darkness and widespread ignorance that prevails on sexual subjects, any habits contracted by uninformed persons, and felt or perceived by them directly to contravene public opinion and commonly accepted standards, are likely to result in mental conflict. *And, as we have pointed out above, it seems to be an undoubted fact, the truth of which is attested by most modern writers on the subject, that the principal evil results of masturbation are on the psychic side, and to be sought in the mind rather than in the body.* "The constant struggle against a desire which is overpowering," writes Griesinger, "and to which the individual always in the end succumbs; that hidden strife between shame and repentance, good intentions, and the irritation that impels to the act—this, after not a little acquaintance with masturbators, we consider to be far more important than the primary physical effect."

That such is a true and faithful picture of the tormented state of mind of many masturbators, few who have ever undertaken the task of attempting to counsel and help them will care to deny. "The poor devils," as Forel terms them, "believe themselves lost, and are often truly pitiable objects, forming types paraded as terrible examples in popular books on onanism which make the hair of timid persons stand on end."

As knowledge advances it is undoubtedly being changed and modified, but until this process is complete it would appear better from the psychological point of view for the individual to resign himself in obedience to it as it now is and to resist the counterclaims of sex, rather than by an indulgence of the latter to be forced to cultivate an artificial self-respect as a defence against the reproach engendered by the former if its behests be flouted and defied. In either case the result will be conflict, but, unless there is special knowledge, this is likely to be less acute in the adoption of a line of conduct that has behind it the support of current conventions than in one that must always be attended by the secret misgiving that it is against the world. "On the psychic side," observes Havelock Ellis, "the most frequent and most characteristic result of persistent and excessive masturba-



tion is a morbid heightening of self-consciousness without any co-ordinated heightening of self-esteem. The masturbator, if his practice is habitual, is thus compelled to cultivate an artificial consciousness of self-esteem, and may show a tendency to mental arrogance. Self-righteousness and religiosity constitute, as it were, a protection against the tendency to remorse." The same writer is of opinion that women are less troubled in this respect than men.

*Traumatic Suggestion.*—It is undeniable that much misery is wrought in the masturbator not only by the subjective sense of guiltiness on the score of flouting the behests of instinct, but also by dread concerning the physical results of the practice induced by direct external suggestion. For although, as we have indicated above, such dire results are in the opinion of most modern authorities almost negligible, except in cases of excess and in persons already neurotically disposed, none the less apprehension concerning them often looms large in the psychology of the uninformed masturbator.

"The patients are terrified by reading quack literature," remarks Dr. Brill, "and, I regret to say, by uninformed doctors. They are threatened with paralysis, paresis, consumption of the spine, insanity, etc., and as a result they become depressed, hypochondriacal, and self-conscious. But as soon as they become convinced that they are not doomed, and that masturbation cannot cause insanity or other dreadful maladies, they soon lose their symptoms. Nor must it be imagined that robbing masturbation of its terrors encourages the practice. On the contrary, I have found that as long as the patients dread it and struggle against it, they masturbate twice as often as when they become convinced that it has none of its supposed terrors."

Part, at any rate, of the duty incumbent upon the adviser or confidant of the masturbator seems to be here indicated; he should endeavor to allay the patient's misapprehensions by sound sexual enlightenment, and by authoritatively insisting upon the erroneous nature of the popular tradition respecting the awful physical results of the practice. He will often find that the masturbator's morbid anxiety leads him to consider himself the solitary victim of the habit; but if it be suggested that this is by no means the case, and that if such apprehensions of terrible effects were really well founded, these evil results, seeing that auto-

erotic habits in some shape are practically universal and occur in every individual at some stage of his life, would be patent in wellnigh everybody, which is manifestly not the case, then the patient may be considerably relieved. If he can be convinced that he has not done himself irreparable injury, and that there is still hope, his powers of resistance and self-control may be revitalized and renewed.

*Fanatical Over-moralizing.*—Kindred in their pathological effect to suggestions and predictions of grave physical disabilities are like predictions of spiritual disaster. Where, on the one side, there is sometimes the threat or prognostication of the asylum, on the other there is sometimes the threat or warning of everlasting damnation. But moral fanaticism on the part of those to whom he turns for help and guidance will not avail the masturbator; indeed, in cases where his habit is determined by pathological compulsion threatening admonitions may serve only to exacerbate the conflict in his mind.

Surely, then, it may be urged that if moral theology is to be truly moral it must take cognizance of the facts instead of traditions which, however widely spread in bygone ages, are no longer cognate to the religious thought and consciousness of modern times. Mere denunciation of masturbation and threats of punishments will not remove the habit save, perhaps, where there is exceptional will-power, and where predisposing factors in the patient's unconscious which induced to the formation of the habit are no longer active in inciting to its continuance. Let it be borne in mind that masturbation, where it is practised to excess, may, like inversion and other psychopathological conditions of the sexual impulse, be determined by unconscious causes, and is more often a symptom of deep-seated nervous trouble than of wilful rebellion against Divine commandments. The counsellor of souls who overlooks or is ignorant of this possibility is not well equipped for his task. As Frink remarks, "The truth is that neurotics are very moral people (too moral perhaps), despite the fact that their behavior would not in every instance appear to confirm such a statement. Compared with the average normal people, their moral impulses are unusually strong and compelling. For whatever they do that is not moral they have to pay in remorse and self-reproaches to a degree which, in spite of all their dis-



placements and defensive mechanisms, exceeds that which the ordinary person suffers for any equivalent misconduct."

The masturbator is not always that hardened sinner and wilful iconoclast of the "temple of the Holy Ghost" he appears to be in the light of popular tradition. Very often he has fought and struggled, watched and prayed, against his failing without ceasing. If he has yielded in the end it has not been by way of ignoble surrender, but by way of overpowering defeat. Where there is unconscious pathological compulsion all the moral remedies such as Noldin proposes are likely to prove unavailing. "It is a terribly serious injustice," remarks Freud, "that the civilized standard of sexual life is the same for all persons, because, though some may easily accept it, for others it involves the most difficult psychic sacrifices."

"I have seen," writes Pfister, "many persons, who strained every nerve to free themselves from moral defects by means of ascetic practices, repentance, and prayer, accomplish nothing except doubt, pathological crippling of the will (abulia), or strengthening of the vice."

Much, therefore, as deviations from the normal and irregularities in the sexual life are to be deplored, and where possible prevented or removed, nothing is gained by denying that they exist, and that, so existing, they present problems challenging a rational solution which is not to be effected by ruling out their discussion as inadmissible because it is repugnant, or by laying down for abnormal persons rules that can apply to normal persons only.

And yet this is the common attitude. Many parents, pedagogues, and clerics, equipped only with traditional acceptances, imagine themselves qualified to admonish and advise on an intricate matter which they have never studied and shrink from bringing out into the light of day. Much mischief may result.

#### ETHICAL CONSIDERATIONS

"Sexuality," remarks Frink, "even perfectly normal sexuality, gives rise to most serious and difficult adaptive problems, and may easily be the spring of actions which will end in pain or misery or disaster for the individual. But for this very reason, and quite apart from the question of making the most of the instinct's great potentialities for happiness and good, all



efforts towards establishing habits that shall control and direct the erotic energies need to be undertaken in the most carefully considered and enlightened manner that is humanly possible. Man's effort to overcome the imperious domination of sexuality has been attempted, as Hinkle remarks, "by lowering the instinct, and seeing in it something vile or unclean, something unspeakable and unholy. Instead of destroying the power of sexuality, this struggle has only warped and distorted, injured and mutilated the expression; for not without destruction of the individual can these fundamental instincts be destroyed. Life itself has needs, and imperiously demands expression through the forms created. All Nature answers to this freely and simply except man. His failure to recognize himself as an instrument through which life is coursing, and the demands of which must be obeyed, is the cause of his misery." "Ignorant and too rigorous early repressive training," continues Frink, "bad family influences, or unnatural ideals, establish in the child such habits 'of feeling and believing about actions' that when he becomes an adult he cannot without pain and horror see himself as he actually is. Tendencies which are innate and inevitable become sources for the development of tormenting affects of guilt; energies that are normal and deserving of direct expression, and energies that, though not normal, could become so, are fruitlessly and wastefully confined and repressed. Instead of securing outlet in the form of activities that are compatible with the requirements of social existence, and which could be given them once they were faced and understood, many of these fundamentally normal and natural impulses remain as skeletons in the closets of the individual's psychic household, which, whenever he gets a glimpse of them, excite him to spasms of morbid fear."

"The fruits of religion," remarks William James, "are, like all human products, liable to corruption by excess. Common sense must judge them. It need not blame the votary; but it may be able to praise him only conditionally, as one who acts faithfully according to his lights. He shows us heroism in one way, but the unconditionally good way is that for which no indulgence need be asked. We find error by excess is exemplified by every saintly virtue."

Again, it is found, by Freud, "that a certain part of repressed libidinous impulses has a just claim to direct gratification,

and should find it in this life. Our cultural demands make life too hard for most organizations, compelling the renunciation of reality and originating of the neuroses, without attaining a surplus of cultural gain."

The theological definition, in so far as it applies to the married life of cultured and well-born individuals who are both physically and psychically normal, will be found in substantial agreement with the first part of this statement, for in marriage, however idealistic and sacramental a value be placed upon its physical aspects, there is, none the less, from the reality point of view, a partial gratification of libidinous impulses and a primary application of instinct. In this partial relief the individual finds salvation. He is not called upon for an absolute repudiation of all sexual passion, and by the gratification of a part leaves in the transmutation of the remainder a task not, perhaps, beyond his power. The surplus may well be developed "sacramentally," if by that term is meant the discharge of all the good offices of consideration, forbearance, sympathy, etc., towards the love-object. Herein, no doubt, lies the secret of a happy marriage and lifelong affection between its partners who use and do not abuse their liberty.

But in the case of those to whom the legitimate outlet of marriage is for any reason denied, it does not seem to go beyond the limits of just criticism to remark that there seems to be implicit in the theological definition of purity quoted above just such a mischievous valuation of the manifestations of sex as may prove extremely prejudicial to healthy-mindedness and personal happiness. For in any of the three spheres in which "repudiation" is demanded much will depend upon the motivation under which it is attempted. Where the motive of self-discipline is supplied by superstition, fear, and such considerations as those proposed by Salvatori, and not by a calm and reasoned realization of inexpediency, failure in honest effort to attain the ideal must inevitably result in acute mental conflict, an overwhelming sense of guilt, together with a crippling and inhibiting sense of personal unworthiness and other pathological consequences. In the light of psychoanalysis it is seen that only in very rare instances and in the case of specially constituted persons is it possible to effect complete sublimation of so powerful and fundamental an instinct as that of sex smoothly and without ill results, and there



is surely something morbid and distorted in the outlook of those who remorselessly brand the failures of well-intentioned persons as deadly sin. "Pure elevation of the instinct which goes beyond the power of the individual," remarks Pfister, "often leads to fanaticism, narrow-mindedness, and narrowing of the vision." Blind attempts at complete repression may be attended by the appearance of highly undesirable and antisocial reaction formations, such as morbidity, an exaggerated prudery, etc., which may constitute a serious handicap to the individual's attempts to adapt himself to the realities of life, and lead him to that forfeiture of usefulness of which William James speaks. "One completely forgets," says Jung, "that one can be most miserably carried away, not only by a vice, but also by a virtue. There is a fanatic orgiastic self-righteousness which is just as base and which entails just as much injustice and violence as a vice."

From the traditional point of view of the inherent evilness of sex it is argued that the battle against it is to be waged unceasingly and at any cost, but from the reality point of view it would appear that asceticism, chastity, and abstinence, in so far as they are merely negative, simply issue in a purity to which all things are impure. If the price paid for such a victory involves the crippling or marring of effectiveness for life and social usefulness, it is evident that this victory for autism results in a defeat for altruism, and a tacit negation of such part of the duty of life as consists in the moral obligation to be at one's best in order to give one's best to others. It is shown by psychoanalysis that the neurotic affections and reaction formations—the undesirable and antisocial tendencies—in which the repressed instinct comes to expression mar the personality so that it becomes offensive, dangerous, ineffective and in a disharmonious relationship to its surroundings. Here there is no true moral achievement. Tradition, by a false and arbitrary valuation of the repressed instinct and by threats and denunciations, has led the individual away from a right and profitable attitude towards reality and life into an exhausting and pathological conflict with it. But true ethical victories can only be won on the level with reality. The same thinking-according-to-reality which exposes the sophism that pleads in favor of prostitution or free-love and shows that excess and violence in the direction of indulgence is immoral because it leads to a variety of results harmful both to the self



and to society, should also show us that excess and violence in the opposite direction of absolute renunciation and repression is likewise pathological.

*The truly ethical standpoint, then, would seem to be, not the absolute repudiation of sex as intrinsically evil, but, on the contrary, the recognition of its inherent purity as a natural life force, and the acceptance of its claims to be such under a sensible and consciously directed effort towards maintaining the same moral ideal of temperance and the same moral guidance and control of its functioning as customarily are exercised in the closely parallel cases of the other primary instincts: so that sex achieves no undue prominence in the individual's life, and it is not over-emphasized either negatively, as demanding the absorption of every energy for its repression, or positively, as occupying the whole field of attention and claiming licence for the indulgence of its every caprice. To be master in one's own house, aware of sex, yet neither its enemy or its slave, and to cultivate a self-control conditioned by reason and knowledge rather than by dread and superstition, would seem to be the ideal conducing to a healthy and joyous life.*

Thus, in reference to the special subject of our study, it may be suggested that those who are sincerely trying to eliminate auto-erotic disorders of conduct will find great comfort and a discharge from much distressing conflict in the acceptance of a purer moral valuation of the sexual instinct; for such will deliver them from at any rate one of the chief influences contributing to that exaggerated and often innervating sense of guilt which, under stress of the old traditional teaching, so frequently attends failure to achieve an immediate mastery over a confessedly undesirable habit.

Religion can help: that, with the present writer, is not under dispute for a moment. But it must be religion rightly viewed and valued. *Not the religion of fear and threatenings, of isolated texts arbitrarily interpreted; but the religion of encouragement and hope—positive, creative, directive, illuminative.* As exemplified by Salvatori and Noldin, religion appears in the sphere of sexual ethics as a power only to be invoked as a purely negative force, and enlisted on the side of blind endeavorings to repress and inhibit that within us which, if rightly used and accepted, supplies a fount of energy for furthering the expansion and

development of the personality, both self-ward and other-ward; but when starved and stifled leads to a narrow and unlovely selfishness, wasted vitality, unsocial eccentricity, and perhaps neurosis. It is little realized, perhaps, how far with many individuals, and especially adolescents, the plane of the religious life becomes almost solely an arena in which they wage an exhausting battle with sex, and how far the field of religious aspiration and the motive underlying prayer and the frequentation of the sacraments are occupied with a striving after a negative victory. And still less, perhaps, is it recognized how far the personal life would be impoverished and the potential capacity of the individual for the acquisition of social virtues and cultural advancement be impaired were the frantic entreaties for a Divine interposition between the self and sex and a total elimination of the holophilic instinct answered directly and in the way desired.

It is, then, not on the ground of the moral value of "other-worldly love" that we part company with our theologian, but on the ground of the implicit assumption he appears to make that an equal capacity for the sublimation of sexual passion exists in all—an assumption he is compelled to make if he would lay down a common law for all. From his definition of purity above, it is, moreover, hard to escape the conviction that to him the sexual instinct, both in the concrete and in the abstract, is something essentially impure. Obviously he would rather be without it altogether. *It is the traditional attitude, that attitude of confounding morals with esthetics, which has been the mother of so many tragedies, and from which has arisen that ruinous false modesty and prudery that forbids an adequate enlightenment of the young, sends youth out to fight the battle of life armed only with the ineffectual innocence of ignorance, or abandons it to learn for itself in a prurient school a false antithesis between morals and reality.* As pointed out by Frink, "As long as we are taught and believe that there is something disgraceful in having a sexual instinct, we have either to give up being honest with ourselves or else give up our self-respect."

## CHAPTER VI

### IMPOTENCE AND STERILITY

SEXUAL IMPOTENCE, SEXUAL WEAKNESS,  
SEXUAL INSUFFICIENCY

TO be sexually potent; that is, to be able to perform the sexual act properly, with satisfaction to the man and woman, several factors are necessary. Those on the part of the men are: (1) A normal sexual desire, what we call a normal *libido*; (2) He must be capable of having a proper erection; (3) The culmination of the act, what we call the *orgasm*, during which the semen is ejaculated, must not take place too soon; that is, the man must be able to perform the act until the female partner is satisfied; (4) He must experience a distinctly pleasurable, voluptuous sensation during the act and during the orgasm. When any one of the above factors is weak or lacking altogether, the man is said to be sexually weak or impotent. The impotence may be partial or complete, temporary or permanent. Sometimes only one factor is lacking, sometimes two or three or all four may be at fault.

Here are the principal varieties of sexual impotence that we have to deal with: (1) Lack of libido. The patient complains that he has no desire for women and doesn't care at all for sexual relations. He is able to have erections, but when he does have intercourse, the act affords him no pleasure. (2) The same as the first variety, only in addition to the lack of libido he is unable to have any erections. (3) Has a normal or even strong libido, but is unable to have any erections. (4) Has normal libido, normal erections, but the *ejaculations* are *premature or precipitate*, taking place soon or immediately *after* or even before intromission. (5) The patient has normal libido, normal erections, normal ejaculations (though as a rule they are premature), but his complaint is that he derives no pleasure from the act; when the discharge of the semen takes place he has no *sensation* whatever. In some cases, the matter is even worse, for instead of a simple lack of sensation, there is a feeling of scalding or burning during

---

\* Dr. William J. Robinson in *Sex Knowledge for Men*. Critic and Guide Company, New York City. (See advertisement last page.)



the passage of the semen. (6) There is libido and good erection, but the ejaculation takes abnormally long, until he and his partner are exhausted, or the ejaculation fails to make its appearance altogether. (7) The man has no libido, no erection, no ejaculation, and if by various manipulations a slight ejaculation is effected, it affords no pleasurable sensation whatever. Sex does not exist for him.

Those are the seven varieties of impotence, but of these classes, three and four are the ones that we have to deal with *most frequently*. And of the two classes, class four, that is, premature ejaculation or emission (*ejaculatio præcox*), is the more common.

We generally divide impotence into two classes; organic and psychic. In organic impotence we can find a plain distinct cause, like for instance an inflammation, disease of the testicles, a diseased prostate, etc. In psychic impotence the cause often lies in the patient's mind; he is really not impotent, but he fears or imagines he is. In the first case the treatment must be medical, like that of any other real disease; in the second variety mental or psychic treatment is often alone sufficient. When impotence is due to old age it is called senile, and is physiologic.

#### THE CAUSES OF IMPOTENCE

**Masturbation.** This is a very common cause, because, as I have stated before, practically every human male begins his sexual life with masturbation. And while the habit, if commenced fairly late and practiced moderately, in the majority of cases leaves no ill-effects, there is no question that if commenced at the age of ten, twelve or fourteen and indulged in immoderately, it may lead to relative or complete impotence, temporary or permanent.

**Pollutions.** Pollutions of rare occurrence or of moderate frequency are harmless. But if frequent and long continued they may ultimately lead to impotence.

**Prostatic Congestion.** An inflamed or congested prostate is often the cause of impotence, but not invariably so.

**Urethral Congestion.** Congestion of the *prostatic* urethra is a frequent and well-established cause of sexual impotence, particularly of premature ejaculations.

**Gonorrhea.** Gonorrhea is one of the great causes of sexual

impotence, ranging probably next to masturbation in this respect; not, however, gonorrhea, by itself, directly, but by its sequelæ. Just as by its causing inflammation of the epididymis and testicles it is one of the principal factors of sterility, so by its causing congestion of the posterior urethra, prostatitis, etc., it is one of the principal factors in relative sexual impotence and premature ejaculations.

**Stricture.** This sequel of gonorrhea is a decided rôle in causing *relative* sexual impotence, that is, imperfect erections and premature ejaculations.

**Organic Causes.** There are certain organic conditions of the penis and testes which render intercourse either physically impossible or very difficult, or at least unsatisfactory. Such, for instance, are: Congenital absence of the penis or its loss from ulceration; hypertrophy of the penis, its size being so large that it cannot be introduced into any vagina; tumors; torsion, where the penis is twisted or bent in a vicious direction, so that intromission is difficult or impossible. Epispadias, or the condition in which the urethra opens on the upper surface of the penis, and hypospadias, where the opening is on the under surface, are usually, but not necessarily, accompanied by impotence: it depends a good deal on the extent and the location of the defect.

*Abnormalities of the Testes.* Complete congenital absence of the testes is, of course, accompanied by lack of libido and lack of potency. As a general rule this is also true of *cryptorchids*, where both testes are in the abdominal cavity.

*Atrophy of the Testes.* When atrophy of the testes is caused by a general constitutional or by local disease, or by masturbation or sexual excess, it is accompanied by loss of libido and by impotence. But this is not invariably true when the testes are lost through accident or castration. As a general thing, loss of the testes does lead to complete impotence, but there are numerous exceptions. And the usually prevalent opinion that eunuchs are incapable of sexual intercourse has been shown to be erroneous. Some castrates are very powerful in this respect.

*Hydrocele.* If excessive, this may become a mechanical cause of impotence.

*Hernia or Rupture.* A scrotal hernia may be and often is a mechanical cause of impotence. The penis is not sufficiently large to protrude, so to say, above the scrotal mass.

*Varicocele.* In the mind of the laity, the relationship between varicocele and impotence is well established; this opinion has been fostered by the quacks, who diagnose varicocele, whether it exists or not, and who advise an operation for this affection as a cure for all ills of a sexual nature. Where the varicocele, however, is well pronounced and extreme, it may be the cause of impotence but, as a rule, varicocele is not of much importance.

*Diseases of the Prostate Gland.* Any abnormality of the prostate, such as hypertrophy, prostatitis, is apt to lead to sexual impotence. In prostatitis, the same as in prostatic congestion, it is usually temporary, and relief of the prostatic condition removes the impotence. It is well to bear in mind that in prostatic trouble, diminished sexual power or premature ejaculation may exist *simultaneously* with an increased sexual desire.

*Phimosis* and preputial calculi may be serious hindrances to the proper performance of the sexual act. They are a frequent cause of premature ejaculations. I mentioned preputial calculi. Sometimes it is not calculi, but just dirt, and the amount of it under some foreskins is simply incredible.

**Age.** This is, of course, a very important factor, for all men become impotent if they only live long enough. But if we attempt to answer the question, at what age men become impotent, at what age is it physiologic, normal, we find we cannot do so; for in the sexual sphere more, perhaps, than anywhere else, is each man a law unto himself.

In many men the sexual power begins to decline at the age of forty and becomes extinguished at the age of fifty. Many men are just as powerful at fifty and fifty-five as they were at thirty, while not an insignificant percentage remain perfectly potent and ardent at the age of sixty-five, seventy-five and later.

**Sexual Excess.** Sexual excess may, *per se*, be a cause of impotence. Every physician who has sexual diseases to treat can testify to that. Fortunately in almost all such cases the impotence is only temporary, though the former vigor may never be regained. As a rule complete sexual rest, with proper tonic treatment, brings about the desired result. But while this is true of adults, it is not true when the victims of sexual excess are boys. In them the impotence may become permanent. I know of cases of very young boys (eight, ten, twelve and fourteen) who have been seduced by vicious servant maids and nurses and forced to per-



form the act the best way they could several times a day. Some of these victims never recovered, remaining impotent for life.

Nothing injures the sexual apparatus so much as its premature abuse. The excess that will in the adult cause but little or only temporary damage will in boys cause terrible and sometimes permanent havoc.

**Sexual Abstinence.** I am firmly convinced that continued abstinence from any sexual gratification may result in—partial or complete, temporary or permanent—impotence.

Nature does not allow us to trifle with her. She does not permit any organ to remain inactive, any function to lie fallow for years without meting out punishment; the organs may atrophy more or less, but even when this is not the case, the function is weakened or destroyed.

**Coitus Interruptus.** The abominable practice of “withdrawal,” or interrupting coitus just when an ejaculation is about to take place and when both parties are at the highest point of tension, is one of the poisonous fruits of human civilization. It is responsible for numberless cases of melancholia and neurasthenia and is an undoubted cause of impotence.

Certain drugs, such as opium and morphine, cocaine, tobacco, potassium nitrate (saltpeter), have an injurious effect on a man’s sexual vigor. Obesity or excessive fatness is as a rule quite injurious; so is alcohol, that is a chronic excessive consumption of alcohol in all forms. Among other causes I will mention the following:

**Worry.** I consider this one of the most important factors in sexual impotence. That great and continuous worry will diminish or abolish one’s sexual desire more than anything else will, is a well-known fact. It is not so well known, however, that it may also induce relative or complete impotence, and what is more, the impotence may be permanent. In most cases, however, it passes away gradually, after the cause has disappeared. But it may require many attempts, considerable sexual education, before the potency is brought back to its former condition.

**Fright.** Severe fright sometimes acts as a cause of temporary impotence, but only fright having some connection with the sexual act. We know of an instance where a man was interrupted in the act by the husband of the woman and several detectives who broke in the door, and he was practically impotent for

nearly a year. Each time when on the point of performing the act the fateful night would come to his mind and the partial erection would promptly subside.

**Intellectual Pursuits.** Nature resents burning the candle at both ends, and it is very rare that people who devote all their time to severe intellectual work do not pay for it by sexual weakness or impotence. This refers to purely intellectual work—mathematics, science, research, philosophy, and so on. Particularly is it apt to attack those who are engrossed body and soul in certain “problems.” A medical investigator told me that, while interested in a certain question which took away every minute of his spare time, he lost both desire and ability for over eighteen months. Pursuits that belong to the arts—poetry, the dramatic art, sculpture, painting, and so on—have a rather opposite effect; they increase the sexual desire and perhaps also the sexual power.

**Intense Desire** is very frequently the cause of premature ejaculation. This intense libido is often manifested on the wedding night, when the couple have been long engaged. A word may be said here about long engagements as a causative factor in impotence. They are not only injurious, as being apt to cause intense libido—which is only a temporary trouble—but they may result in more or less permanent impotence, by virtue of the severe prostatic and posterior urethral congestion which they may cause.

I have considered rather in detail the causes of impotence. For a knowledge of the causes will help you to guard against the disease. Avoid if you can all the troubles which are apt to lead to impotence, and you will avoid the condition which is responsible for so much unhappiness, and for so many disrupted homes.

Another point: Knowing the numerous causes which may be responsible for impotence, you will understand the utter absurdity and dishonesty of the quacks who promise to cure you by some pills or capsules or some one kind of treatment. Any physician or quack who promises to cure you of impotence at long distance, without having examined you, without knowing your exact condition, is a knave, who is after your money. Shun those harpies!

The treatment of sexual impotence is exceedingly complex, exceedingly delicate, and requires a competent and experienced physician's best skill and best judgment. We must confess that even the average general practitioner is not very successful in the

treatment of the more severe varieties of impotence. This being so, how can you expect to be cured by an ignorant advertising quack, or by some mail treatment?

#### STERILITY

Barrenness, sterility, or inability to have children, may be due to the husband or to the wife.

Up to recent years if a marriage proved childless, the fault was always laid at the door of the wife; but lately it is admitted that the husband is often at fault, and some estimates place his share at as high as 25 per cent. In the male sex the condition is generally the result of a previous gonorrhea which closes up the little tubes by which the seminal fluid escapes, and either few spermatozoa are discharged, or none at all. Of some forty sterile marriages in which nothing to account for the cause could be found in the wife, examination of the seminal fluid from the husband showed no spermatozoa whatever in fourteen. (A similar condition is found in animals, though, of course, venereal diseases are ruled out. Thus a prize stallion not siring any colts from a series of thirty-four mares, during two years, examination of the animal's semen proved the vital animalcules (spermatozoa) were entirely absent.)

So far as the female is concerned, the opening from the birth canal may be blocked, preventing the male elements from reaching the egg to fertilize it; or the womb may be misplaced or have tumors in it, which lead to the same effect. Another frequent cause is inflammation of the womb, which—again—has the same result, but by preventing the eggs from coming down to be fertilized. Occasionally the birth canal is so acid that when the male elements are deposited in it they are quickly rendered incapable of motion, for as shown (under the Anatomy of the Reproductive Organs), the lashing movements by which they make their way along the female passages are soon stopped by contact with acids. A woman, childless for fifteen years, when examined shortly after intercourse, still harbored living spermatozoa, yet a few hours later these were all dead. Attention was then directed to the diseased condition of her birth canal, with the result that in a few months, she became pregnant.

Mathews Duncan, a famous English authority of the last century, asserted that where the married couples were young



(*i. e.*, between 20 and 30) at least four years must be allowed to elapse before the marriage could be regarded as sterile. (The writer knows of two doctors in whose cases, 14 and 15 years respectively, elapsed after marriage before the first child was born.) Duncan also found that where the wife at the time of marriage was over 40 years, only 15 per cent of the unions were fertile.

It sometimes occurs that one child is born, and the wife is barren from that time on. This condition is called "one-child sterility," and is most often set up by inflammation of the tubes by which the eggs come down from the egg-sacs into the womb. Besides the common inflammation due to previous gonorrhea in the husband by which the wife becomes infected, closing the channel in the tubes, the process of childbirth itself, especially if accompanied by "childbed fever," may give rise to the same kind of inflammation, even though the husband be healthy.

Everyone knows of cases in which marriages are childless, yet one or both of the couple may be fruitful with other partners. Good examples of this are Martha Washington, and the Empress Josephine. The latter had children previous to marrying Napoleon, and the Emperor a son after he had separated from Josephine, and wedded Marie Louise.

Not long after the  $x$ -rays were discovered it turned out that the operators working with them became sterile. Since then protection is assured by standing in a closet lined with lead and a switch to manipulate the apparatus. Females also become childless after being exposed to the rays for the relief of various conditions, and advantage is now taken of this fact where future childbearing would be prejudicial or dangerous.

## CHAPTER VII

### SEX—EUGENICS—HEREDITY

THERE are several advantages connected with sexual reproduction which are enumerated as follows by Geddes and Thompson in their "Evolution of Sex": (*a*) It is more convenient, only two cells are needed instead of several thousand, as in fission or budding. (*b*) In higher animals asexual reproduction is impossible. No bird, for example, could multiply by splitting off (fission), or an elephant give off a bud. (*c*) The reproductive cells are sheltered in some measure at least from the accidents of bodily life in general.

On the average, 1,059 boys are born in the United States to every 1,000 girls. Much thought has been directed towards the reason for the causation of sex, but it must be confessed with no very satisfactory results. Thus the eggs which produce boys have been supposed to come only from the right ovary, and the ones for girls from the other side. Other views are that males come from poorly-nourished and females from well-nourished animals. That if the husband is older there will be more boys. That if the mother is strong-minded the children will be mostly boys. That eggs of one sex are produced one month and of the opposite sex the following month.

It is believed by some writers that sex is a property of the egg alone, and the male elements (spermatozoa) merely stimulate growth. An observer in this country, and another in France, were able to start development of certain lowly forms of animal life—such as sea-urchins—by merely adding chemical stimuli to the sea water in which the egg was placed. In this instance, naturally, there was no contact whatever with the male elements.

We have to recognize, says Michels, the existence of an inalienable right, which has all the clarity of a natural law, and is endorsed by the essential data of physiology. The recognition of this right throws light upon the difficult and complex ethical questions of sexual love.

Sex being inseparable from the human body, it inevitably follows that love cannot be reasonably considered independently of the bodily function with which it is thus associated. It is not

denied that the tree of love may grow upwards into the purest and most sublime altitudes of idealism; but it remains always true that its roots are found in the mother earth of the sexual function. To exclude sexuality from love would kill love as effectually as we should kill friendship by excluding devotion, science by excluding freedom of thought, religion by excluding metaphysics. Love without sexuality is a delusive or dangerous auto-suggestion. A sexual love, within marriage or without, is void and vain. In practical experience every one is aware that love is necessarily based upon a sensual foundation.

#### EUGENICS

In the past few years there has been a great pothor about "eugenics," which means prevention of the birth of children who are not likely to begin life well owing to mismating of their parents. For the reasons adduced under Heredity, any palpable results from eugenics systematically enforced would not be noticeable for a long time, though some examples shortly will throw considerable light on the problem.

Clouston, the late English specialist in mental diseases, said: No farmer now breeds from a bad stock of horses, cattle, or sheep. Dog fanciers have produced the innumerable varieties of that animal by skilful selection of the parentage. Race horses and Clydesdales are entirely the result of selecting swift or strong sires or mothers. It is naturally asked by thoughtful men: "Why should men, the 'lords of creation,' be the only living creatures who do not get the benefit of modern scientific knowledge either of such laws and practice of human selection or of natural selection."

There is—or used to be—a proverb in the United States, "There are three generations from shirtsleeves to shirtsleeves." That is to say, the grandfather starting in his shirtsleeves, as a farmer or laborer, his son amasses a fortune, which in turn is scattered "to the birds" by the grandson, who ends life as his grandfather began it—working in his shirtsleeves. This is merely an exemplification of what is of everyday occurrence, the sons of great generals or great financiers are of average ability only, showing no particular bent for military affairs or for money-getting. For instance, the Duke of Reichstadt, the son of Napoleon, showed no trace whatsoever of his sire's military talents.



True it is that he died at an early age from consumption induced by his dissipation. The chances were against him no matter how long he lived, probably the best for humanity after all!

It has been found that the birth rate among people of poor stock is higher than usual, probably about 25 per cent. In other words, the imbeciles, feeble-minded, and epileptics, etc., tend to increase considerably faster than their neighbors without such defects.

Let us now contrast two families, the first one that of the Jukes in the Eastern states, which has served as a "horrible example" for many years. (The name is fictitious, of course, for disguise.) In the space of three-quarters of a century, some 1,200 descendants were traced, of these 310 odd were professional paupers who aggregated 2,300 years in different poorhouses; 130 criminals; 60 habitual thieves; 50 prostitutes and 7 murderers. It is calculated that in the three-quarters of a century, the money loss to the community in failure to follow any useful livelihood, expenses of prosecution for offenses, cost of keeping the various members in jails, hospitals and poorhouses, together with the value of the goods stolen footed up a total of \$1,300,000.

The contrast is shown by the other group—that of the descendants of Rev. Jonathan Edwards, who, while having a good education, seems to have been not especially remarkable, he married his equal in intellect. Early in this century, a tabulation similar to that for the Jukes family was made, but showed vastly different findings: Of the 1,394 descendants who were traced, there were 295 college graduates; 108 clergymen; 101 attorneys; 75 army and navy officers; 65 professors; 6 authors of more or less prominence; 60 physicians; 30 judges; 16 presidents of railway or steamship companies; 13 college presidents, and a vice-president of the United States. With this long roll of distinguished callings, we are not surprised to learn further that not a single descendant had ever been convicted of crime.

One of the most convincing arguments which occurs to the writer of the necessity for some regulation of marriage, is the case of a professional colleague. Parents and grandparents on *both* sides had epileptic fits, yet they married; and, of course, my colleague had them finally growing so bad he had to abandon practice.

Davenport in his "Heredity in Relation to Eugenics" (p. 89) alludes to an "intelligent" physician of good family, who studied abroad, married a woman, also of good family, but the victim of migraine [sick headaches], and warnings of St. Vitus' dance. Of the two children, both boys, one was normal, the other had a mania for running away from home. If doctors pay no more attention than this to selection of their partners for life, what can be expected from the common people? One of the characters in an ancient Greek play (of Euripides) is made to say: "Physician, heal thyself," and the instance just quoted is one evidently in which this advice should have been taken.

The Supreme Court of Prussia (December 17, 1920) decided in favor of eugenics. A man refused to obtain a health certificate, and his fiancée broke the engagement. He thereupon sued her for breach-of-promise, but lost the case.

#### HEREDITY

Heredity is the tendency to resemble the parents which is possessed by organisms in general. What little is positively known about it has been learned from the lower animals. In human beings, the number of offspring is too small to allow for all the possibilities. Moreover, man is a slow breeder, and transmission of traits or characters impossible to study for any length of time. Since the Christian era, with say three generations in each century, we would have but 57 or 58 generations, while in some of the lower animals, as many generations can be had in a couple of months, and in others almost as many in a couple of years.

In the past some remarkable views have been set forth concerning heredity. For example, Haller, the Swiss physiologist of the eighteenth century, believed that when Mother Eve was toddling about the Garden of Eden, some 200 trillions of human beings—necessarily on a very small scale—were packed away in her egg-sacs (or ovaries). That is to say, germs of all individuals of either sex to be born in future ages!

At present two views are most in favor: The late Francis Galton, who introduced the method of identification by fingerprints, set forth as a law of "ancestral inheritance" that the parents contribute between them about one-half; the four grandparents, one-fourth; the eight great-grandparents, one-eighth; the fraction remaining going still further back.

Long before Galton, a Moravian monk named Gregor Mendel, experimented with peas in the garden of the monastery, and at length formulated a theory of crossing (hybridity). Unfortunately, his paper being published by the Academy of Sciences in his town, attracted no attention until it was unearthed a few years back, and about half a century after it was published. "Mendel's law," as it has been called, does not explain all the difficulties, nor is it so satisfactory when applied to human beings, though the enthusiasm with which it has been taken up bids fair to overcome this objection.

Mendelism in brief is that if a black male, let us say, is mated to a white female, then one-quarter of the offspring will be black, another quarter white, and the balance mixed. Or, to choose an example from human beings—if a mentally sound person should marry one who is feeble-minded, and there were 8 children, we should anticipate that only 2 would be mentally sound, an equal number feeble-minded, while the intellects of the other 4 would be more or less deficient.

For over a hundred years a violent controversy has raged as to whether some acquired deformity or mutilation can be inherited. Let us suppose a man met with an accident necessitating amputation of an arm, will his children be born with an arm missing? It is hardly necessary to state this does not take place. The Jews have practiced circumcision since the days of their law-giver—Moses, yet the babies still need it even at this late date. The feet of the well-to-do Chinese women have been bound and crippled for hundreds of years; we believe this abominable custom has been prohibited since the country became a republic, but at any rate the deformity was never inherited up to the time it ceased.

On the other hand, some disease-conditions are distinctly transmitted; there are several mostly of interest to doctors, but two concern conditions which should interest every intelligent individual. These two are inability to distinguish between colors (color-blindness), and the affection met with in persons called "bleeders." In the latter the most insignificant wound, a pin-prick, vaccination, small cuts with a pocketknife, are followed by bleeding which keeps on for hours or even days, in spite of all the usual remedies. A curious thing about these hereditary affections is that while they occur in the males only, they are not handed down by them, but by the healthy females.



## CHAPTER VIII

### HOW TO LOVE\*

#### LOVE AND LIFE

THERE is no understanding of Life without an understanding of Love, the source of Life and our chief motive power. The histories of nations record the careers of kings, the intrigues of politicians, the wars of aggression and defence, and the industrial progress of the people. Yet even more vital than these are the scarce chronicles of the loves and the marriages of a community. The security and the well-being of nations are not only to be found in evidence of martial valor, the development of crafts, and extension of territories. The trend of social evolution is determined by love even more than by conflict and commerce.

The passion that attracts and unites the sexes is powerful and mysterious. Throughout Nature it is never simple. Primarily, it is the means of the continuance of life. Both directly and indirectly, love shapes the course of individual men and women and groups and societies.

True love never ran smoothly since the world began. Each spring the complicated courtships, the combats, and the tragedies of the animals testify vividly that mating is not an easy and simple process, even among creatures often supposed to act automatically.

How futile, then, is the attempt sometimes made by man, a being of highly sensitive nerves and the subtlest brain mechanism, to jest idly about love, or to dismiss it as mere "instinct"! As a matter of fact, instinct fills a subordinate part in the conduct of human love. I have known educated men, about to undertake the duties of husbands and fathers, whose "instincts" were utterly lacking in the most important of human responsibilities. An instinct may prompt insistently; but it does not take the place of reflection or reason in the guidance of civilized men and women in many grave matters concerned with instinctive desires.

In our own country, for a long period, there was no scientific investigation in this unexplored field. *Ignorance, reticence and*

---

\*By Walter M. Gallichan

*prudery darkened and distorted the subject.* We are now awakening slowly to the vast importance of imparting the necessary knowledge. Books especially written for children and for young men and women of the marriageable age, are issued by leading publishers who recognize the trend of public sentiment in this direction.

Nevertheless, there is still some opposition among a section of the community to the diffusion of this knowledge. The late Hugo Munsterberg, in Boston, said that boys should be instructed very slightly, if at all, and that the truth should be withheld entirely from girls.

This obscuring of the light for the potential mothers of the race, who, from the very nature of their supremely responsible position, stand in the greatest need of enlightenment, is typical of this professor's reactionary attitude in social matters.

Gradually, however, in England and in the United States, the imperative demand for this sane and reverent teaching among the young is being recognized by parents, religious teachers, doctors and schoolmasters. Responsible authorities have begun to see that the menace of ignorance is appalling. Love is too overwhelmingly important to the race to be left to instinct and blind chance. We regulate the relationship of the sexes with a hundred legal enactments. Yet we offer little or no guidance for right living in marriage. The common counsels of the man in the street are usually worse than futile. Lovers entrust to one another their very souls and destinies, and blindly enter into matrimony and the reproduction of offspring. Do we act thus heedlessly in the conduct of business?

#### THE IMPULSE TO LOVE

The ingenuity and energy of Nature are more manifest in the impulse to love, and in the complex play of wooing or courtship, than in any other human activity. We are born to love.

The passion that unites the sexes is foreshadowed and symbolized in the loves of the plants, and illustrated in the elaborate courtships of animals. In biological terms, love springs from "the elective affinity of two different cellules." In poetic phraseology the universality and inevitability of love are expressed by Shelley's beautiful lines, "Nothing in the world is single." Creative force, as Emerson said, repeats a continual chant that fills heaven and earth.

But for love the world would be lacking in beauty, and the most powerful incentive to living and action, after the primary instinct of self-preservation, would not exist. The selection of mates throughout the domain of Nature brings forth the finest qualities of courage and intelligence, and determines the adornment of tropical birds, inspires the voice of the nightingale, paints the gorgeous down on the wing of the butterfly, gives to man his stature and strength, and to woman her grace and loveliness. Wooing, and the choice that it implies, are the first cause of the progress of a species, of the supremacy of a race, and of the development of the noblest human virtues and emotions. Morals, esthetics, hereditary genius, all indeed that purifies and beautifies life, spring from the subtle affinities and the intense emotions called into play by love and courtship.

The lower forms of animals display the art of love-making. The stickleback, that builds a nest to lure its mate, and develops glowing colors in the mating season, is but one lowly instance of the immense importance that wooing assumes throughout all life. Among the higher mammals and the monogamous birds love becomes a sentiment marked by tenderness and refinement, and so finely evolved that it contrasts with the ruder courtships of some human primitive tribes. And in the domestic life of many animals, and their supreme devotion to the young, we may trace the moral instincts that form the basis of the highest ethics among men. As we pass from the higher intelligent animals and the savages to civilized man we find that the instinct becomes more and more closely linked with the profoundest psychic emotions, and is a rich source of spiritual expression, sympathy, and altruism.

A world without the vast motor-power of love is unthinkable.

#### MASCULINE STANDARDS

Racial evolution deepens the emotion of love and makes complex the play of attractions and selection.

Falling in love is the result of a physiological need; but as mankind moves upwards the primary basis of passion is refined and spiritualized, and gratification is not the only object of love.

The soul, the mind, the character attract some lovers even more than the fairest physical charms. An ideal of close companionship and the tenderest form of friendship between the



sexes succeeds the mere physical craving. The lover is still entranced by the glance of his mistress's eyes, the glint of her hair, and the sound of her voice. All the senses are concerned in selection. But to the esthetic attractions are added esteem, admiration for virtues of the heart, and rare joy in mental communion and reciprocal help.

As society advances towards equality of the sexes, women begin to recognize that the appeal of beauty alone, the ancient masculine standard of desirableness, has tended to stress unduly this attribute of their sex. Men also learn that feminine physical charm alone does not ensure constant affection, or satisfy all the cravings of the heart and brain. Among the more cultured, courtship becomes intellectualized and less manifestly and purely sensuous. This does not imply a negation or an under-valuation of passion; for only through education and refinement can we appreciate the true meaning and the far-reaching, beneficent influence of devoted, fervid love.

This transformation of ideals is attributable chiefly to a growing consciousness among the higher types of women that simple attraction has not given them the true human dignity to which they aspire. In a significant manner the ideal of beauty, or the standard of physical allurements, has repressed women, and hindered their finer mental and moral progression. The enormous expenditure of energy upon the preservation of the bodily signs of youthfulness, the intense preoccupation with dress and adornment, and all the arbitrary accentuation of sex in women have stood in the way of feminine advancement and true happiness to an extent that only a minority of cultured women at present realize.

Artificial femininity is distinct from womanliness. The cultivation of beauty and the desire for finery and ornaments are normal expressions of woman's estheticism. But this innate love of decoration has been fostered and developed to excess, until it has almost filled the whole lives of hosts of women in the civilized races.

Women will more generally demand to be loved for their minds as well as for their faces; and this insistence will force men to equip themselves mentally for psychic companionship with wives who refuse to live as simple dolls and petted, foolish playthings.

The remarkable changes in the status of women will undoubtedly complicate and partially revolutionize premarital love-making. With the manifold social benefits of the ancient Grecian culture there was still a significant inequality between man and woman. Historians have perplexed their brains with speculations as to the causes of decay in the mighty Hellenic empire. None of these seem to have suspected that the repression of women, by neglect of education and the denial of perfectly free choice in marriage, may have been two of the sources of gradual disruption.

Complex wooing is one striking phenomenon of the general complexity of advancing humanity. Ages ago an Icelandic saga asserted that "it requires good sense to be a lover." In our day there is still greater reason for aptitude and intelligence in the selection and courting of partners. No hard-and-fast rules and maxims can be set down. There is, however, a possible safeguard against the sinister error of accepting a sudden and violent attraction as evidence of right choice and complete warrant of permanent affection. In youth, and even in maturity, the susceptible and romantic are often exposed to extreme peril when an embodiment of loveliness arouses admiration and yearning.

There can be no entire exclusion of the element of chance in selection. Science has no definite formulæ for guidance in this subtle matter. The successful wooer possesses a natural competence. Nevertheless, courtship is an art that may be studied with advantage to lovers and to society. This rehearsal period before the drama of marriage is of profound importance.

Betrothal is often a spell of anxiety and trial. Patience may be more imperative at this time than after union. A complete confidence to the end of mutual understanding is highly essential. A kiss and the pressure of hands may be strangely eloquent, and educative and spiritualizing influences by no means lessen the meaning of such tendernesses. But tastes, preferences, views, aversions should not be hidden. Better a parting now, while the heart is unseared and young, than five years hence after torturing discovery, disillusionment, and despondency.

It is a bitter awakening when a wife learns after marriage that a vital phase of a husband's character was unknown to her during courtship. It is a disastrous disappointment when a husband, who has not frankly encouraged a bride's confidences,

discovers that she was temperamentally unrecognized by him during courtship. Tragic is the reproach: "You did not tell me that you felt or thought in this way before we married."

In the section upon "Marriage as an Art," I have pleaded that wooing must be as persistent and skilful after wedlock as before. This does not mean that pre-matrimonial love-making is not of vast moment in determining success or calamity in marriage. On the threshold of the temple of love a man should search his heart boldly as to whether his passion is really deeper than sensuous impulsions. And the woman should say to herself, "Am I marrying this man because my heart and my brain tell me hourly that he is an admirable, true companion, whose love I need and cannot live without; or am I taking this momentous step because I am dissatisfied with my present mode of life, or because the reflection of living an old maid depresses me; or because my suitor's position and money give promise to material benefit?"

"Woe to the man," writes Mantegazza, "who in solitary and sad contemplation of his wife says to himself: *My companion is only a female!* Much worse is it, and woe to the woman who, in the night watches, looking at her husband as he snores, says in a low, fretful voice: *My husband is only a male!*"

Courtship is the period of discovery. Without this discernment the prelude to a lifelong union seems wholly meaningless. This is why educated persons nowadays make a wooing a far more serious affair than did our ancestors of a few generations past.

Experience, reflection, and observation of human life teach the intelligent that the risks of marriage are great. Knowledge convinces that passing infatuations are very frequently mistaken for deep passions, and that association and perception may utterly dispel the illusion, and leave us wondering why we were duped by irrational fancies.

#### THE ART OF UNDERSTANDING

True marriage based upon love and esteem is a prolongation courtship. The reason why arranged unions, the marriages of convenience or of parental direction, are frequently successful, is that in these cases wooing begins with living together. In most of the Western nations a protracted love-making precedes wedlock. Dur-



ing this probation the couple are acutely anxious to please one another, and there is a constant interchange of attentions, tenderness, and solicitude.

Too often wooing ceases with the bridal ceremony. The pair have obtained possession of one another, and the restraints of betrothal are removed. There is more frank self-revelation, less considerate regard for the everyday courtesies that count for so much and frequently there is shown a tendency to discover faults and to criticize actions. The real man and woman stand plainly revealed one to the other. There is a conventional British view that making love is somewhat ridiculous after the honeymoon. Courtship is abandoned as a sort of necessary folly preliminary to complete union.

In many treatises upon love that have been written by pious Eastern sages, with intense sincerity, the greatest stress is laid upon wooing after marriage. Grave and precise counsels are offered to young husbands concerning the nature of women, their needs, antipathies, and predilections. Patience, sympathy, and refined tenderness are enjoined. The ideal of romantic, passionate devotion is raised. "As is sickness without a physician, as living with relatives when one is poor, as the sight of an enemy's prosperity, so is it difficult to endure separation from you." Such was the sentiment of married lovers in India more than a thousand years ago. The amatory poetry and prose of our own day sometimes echo the emotion and wisdom of Eastern genius.

The common use of the phrase "conjugal rights" shows that the reciprocal altruisms of wooing often tend to disappear in Western marriage. The husband is no longer the suppliant or pleader for privileges. He is a citizen with the law behind him, insisting upon "rights." This conception of matrimony is a source of the deepest discontent among women. It entirely negates the art of marriage, and reduces the wife in theory, if not always in absolute practice, to the status of a serf. It annihilates the spiritual element in conjugal love, and fatally accentuates the masculine tendency to exert force in place of tender suasion.

*There is no hope for widespread married happiness till men learn that love is the art of understanding and pleasing women. Wives in revolt are the natural result of man's neglect of the art of courtship in marriage. It is the woman more often than the man who is disappointed in married life. After marriage it is the*

*husband's part to show his aptitude in arousing and maintaining the responsiveness of the wife.*

The guerdon of the skilful wooer, who realizes that his art is as long as life itself, is the noblest that fate can bestow. Love excels every human joy. Mathews Duncan, the great physician, says truly that this impulse exercises, more than any other, "emotional power over the individual, power also in morals, power in social questions."

The good lover is not only pursuing his own individual ends. His love illumines his whole outlook upon life, and flows out to humanity in sympathy, understanding, and social well-doing. Mark Rutherford declared that passion and vitality are one. The vital men and women are the brain and thews of the race, and the vital are lovers. This dynamic of love, ten times mightier than the sword, is the salvation of human kind.

#### FREEDOM OF CHOICE

The question of choice usually decides itself, for good or evil fortune, by a complete obsession of the will. There is, however, often a definite, elaborate, fore-thinking, which shapes the image and describes the character of the desired loved one. Ninety-nine times out of a hundred the *complete* ideal is not realized.

A woman attracted to two men, with a preference for one of them, remarked to me that she wished she could secure the admirable and differing qualities of both and combine them in one lover. This is more than fate permits. Human nature is never perfect. And yet it is the supreme rare fortune of some lovers to discover even more charm, virtue, and good sense in the husband or wife than they attributed to him or to her during the wooing period.

Certain physiological signs should aid a man or woman in the choice of a desirable companion for life. Physiology, the most neglected of the sciences, is a trustier light in this important quest than most men surmise. Physiognomy sought to interpret character from the features; phrenology claims this discernment through an examination of the structure of the skull. The newer psychology, now in a vigorous infancy, and born of a fuller appraisal of physiology, reveals the moral disposition and the mental traits of men and women by a study of the bony frame-

work, the quality and color of the skin, the constitution of the nerves, and other physical characteristics.

Fortunately there is "a Jill for every Jack." The misfortune is that the maiden and the youth often err in choice, through a lack of knowledge of human nature. Although instinct must be directed by reason, there is an instinctive attraction, difficult to define, but recognized by many, which often guides truly. The woman who, after shaking hands with a man in whom she was interested, declared that the mere touch of his hand instantly convinced her that she could never love him, affords a clue to this strange influence of attraction and repulsion, an influence that cannot be described in formal terms. Another woman, who sincerely admired a suitor's moral qualities and academic attainments, stated to me that she rejected him chiefly because his form, to her artistic eye, was "out of drawing." This, however, is an instance of the play of a strong esthetic feeling, rather than pure instinct.

#### WHY LIVES ARE WRECKED

Every man tries to discover the nature and intensity of woman's love. Few men succeed in the quest.

Those who are frustrated resort to old adages for consolation, and profess that women's passions are cold by a design of Nature. Men have themselves to blame for their ill-success in this research. The standards of feminine virtue, modesty, reserve, and reticence have been set up by men, as the dominating sex; and woman's dependence on the breadwinner and the protector of the brood has caused her subservience to man. Any divergence from tradition instituted by man as the patriarch, or supreme head of the family, has brought penalties and sorrow to women.

The dread of arousing dislike is one of the origins of sex-modesty. Women all the world over possess a native modesty; and among primitive tribes the instinct is often very marked, and is deep-rooted in the female sex, though the forms of expression vary according to race. Civilized women are forced by convention to preserve extreme reticence upon their most intimate, and therefore highly vital, desires, feelings, and deepest emotions, because masculine opinion is generally in favor of vestal ignorance.



To profess to love a woman, and at the same time to take no pains to discover how she wishes to be loved, should be regarded as an unpardonable injustice and a gross absurdity. Yet I have heard men declare that it is a sign of indelicacy in a woman if she shows an intelligent interest in the continuance of human life.

*It is a terrible anomaly that the greater number of women of the alleged "educated classes" marry with only the crudest knowledge of the truth of married life, or without any knowledge whatever. A society that permits such a sin against personal liberties and rights has no claim to be considered as humane or intelligent. I could cite a large number of instances of men and women, personally known to me, who have wrecked their lives, or at best lived in a kind of conjugal armed neutrality, through errors of ignorance.*

The coldness of women is often remarked by men, and is sometimes said to be normal. When men complain of woman's irresponsiveness, coolness, or indifference, they are wont to ignore their own responsibility in the matter. *Is it reasonable to suppose that ardor and passion will take possession of a shy, utterly inexperienced woman, who is suddenly, tactlessly, and as often happens, roughly, thrust into wedlock?*

The joy in mating is as much the natural heritage of the woman as of the man. Fantastic in the extreme are many of the vulgar beliefs concerning the relative intensity of the two sexes. Even well-educated men often display a quaint ignorance in this matter. It is enough to state here that Nature has plainly indicated woman's capacity for happiness by endowing her with sensitive nerves. But men should know that a measure of resistance in wooing is normal in woman, and that for many, perhaps most, women the heart must be won before the senses.

Until men deem it essential to make a proper study of woman, and until they recognize that love in marriage is an art requiring more delicate skill than courtship, domestic disasters and tragedies will abound.

Women should know themselves physiologically before entering upon marriage and its momentous responsibilities. It is a hopeful augury for the future that cultivated women are beginning to realize the importance of all knowledge tending towards the upraising of love, the holiness of maternity, the improvement

of the human race, the direction of the minds of the young in sex matters, and the hygiene of wedlock.

The nature and expression of woman's love differ from man's love, because selection is a stronger factor in the feminine than in the masculine choice of a partner. All the foreplay of animals in courtship is directed towards a very definite end. The "showing off" of the peacock whose gorgeous tail feathers are the product of selection on the part of the hens, the antics of the male grouse, the gambols of all quadrupeds at the time of wooing, and the embellishment of the body and the trials of strength among primitive men, are instances of Nature's contriving that the fittest male shall be secured by the female.

A young girl in love exercises choice both consciously and unconsciously. The spirit of the species speaks within, but its whisper is scarcely apprehended in conscious thought. She is attracted, and she loves in obedience to the fervor of her being. Her heart glows with affection, and her brain assures her of desirable qualities in the character of her suitor.

But her apparent free selection is actually less free than she imagines. Rooted in the very depths of her ineradicable instincts is the desire for the man who makes the strongest appeal to her as the fitting progenitor and protector of her children. This is why the purely esthetic physical attractions of men play an inferior part in determining the choice of women. It has been often noted by men, to their chagrin, that a handsome face and the external graces of manhood do not always and readily insure success in love-making. The men who charm women are frequently ill-favored in features, and sometimes they are positively ugly.

Masculine beauty, considered in the abstract sense, certainly evokes the admiration of a number of women, and especially those possessing esthetic or artistic appreciation. When, however, the great question of choice is in the balance, man's beauty of countenance is a very subordinate, or wholly unessential, influence. In this marked respect feminine selection in love differs supremely from the masculine.

To man the lure of woman's loveliness often proves fatally invincible, obscuring a host of temperamental and moral defects, and inhibiting suspicion of incompatibility. The bad, beautiful

adventuress finds men her willing prey. The plain, noble-hearted, virtuous woman is often a celibate for life.

Men have given comeliness to women through the constant choice of the most physically alluring. The pæans to the beauty of woman, and almost all the rhapsody and intoxication with feminine charms presented in literature and art, are masculine. Comparatively few women experience the intense pleasure of the lover's gaze upon the beloved. One or two women have assured me that they are repelled by the masculine figure; while a very large number are quite supine even in the contemplation of an Adonis.

Just as beauty is man's dower to woman, a biological fact that she is apt to overlook, so is the strength of man the gift of woman. The early female ancestors of our stock aided this evolution by selecting the strongest men as their mates. Their descendants exert the same selection, often dimly in their own minds, or quite unconsciously.

Woman's instinct in mating is a choice of the man who impresses her by a real or seeming strength and virility. Has not every one of us remarked the apparent capriciousness of women we have known? They refuse the physically refined, handsome wooer, and become almost slaves of a husband who is altogether deficient in facial charm, a huge "blonde beast," intensely and aggressively masculine.

In the main, then, woman's normal bias in selection is for force, power, and strength. Her unguided intuition may lead her astray in fulfilling purely personal ends; but mostly she obeys a racial behest that is inviolable.

The supposed relation of fervor in love and physical strength is, broadly speaking, an incorrect conclusion. Great athletes and prodigies of muscle are often not only cold in temperament, but physiologically feeble as parents. The normally strong man is really the finer, more harmonious type than the athlete, whose energy is used up in the making of mere muscular tissue.

#### WHEN MEN LOVE

In passing from the examination of the chief characteristics of woman, and the physiological and mental differentiation of the female from the male sex, to an analysis of the constitution of



man, it may be well to point out that, in the sex domain, men are less variable than women, but in other respects they show a greater tendency to variation. Physically, men are more liable to abnormality than women, as instanced in clubfoot, hare-lip, anomalous ear-structure, mal-position of internal organs, and other defects and variations of structure. There are more deaf and dumb men than women. Idiocy is commoner in the male than the female sex. On the other hand, genius is more often found among men than among women.

In love man is more comprehensible, direct, and less fastidious and capricious than woman. The explanation is simple: Upon woman lies the graver responsibility in love selection; for she chooses not only a lover, but a potential father. Paternal instincts do not strongly sway the man, who is primarily obsessed by the charms of a woman. He is absolved from the greater task of giving life and all its risks and pains.

The directness of man in selection and wooing is the law of Nature, and as essential as the indirectness, hesitancy, coyness, and reserve of the object of his passion. Literally, she is "giving herself," and incurring dangers and sufferings to which her lover is not exposed. If he thinks twice before asking for her hand she thinks ten times before yielding it.

Her deliberation may seem evidence of coldness and calculation. In all cases where her heart is vitally concerned her hesitancy is not an affectation, but the manifestation of a sub-conscious maternal solicitude. Her choice is inexplicable to herself in a set formula. All she knows is that the appeal of this man is irresistible, and fire and flood will not restrain her.

A man is more impetuous, sudden, aggressive and confident in his wooing. He can afford to be more love-distracted, romantic, idealistic than the woman. In nine cases out of ten there is no defined sense of paternity mingled with his intense yearning for possession. The question of a family may scarcely enter into his reflections. He is the eternal male, urged on by an overwhelming impulse to seize the woman and to bear her away. Her reluctance alternately stimulates and irritates him, and it may even cause exasperation and anger. The senses have overpowered him; the reason is arrested; he may behave insanely. For the lover and the lunatic cannot disclaim kinship. Passion is an exaltation and a furor.

I believe that the majority of men are apt to attach a want of sense and good taste to the women who refuse or reject them. This attribution arises not solely from male vanity, but from a deep misunderstanding of the selective instincts of woman, and all that these feelings imply and determine. We are not loved by a woman simply because we are of the opposite sex, or because we happen to be handsome, tall, wise, witty, amiable, or wealthy. A man may possess all of these graces and advantages, and yet fail to charm a woman who desires love and marriage.

A maiden permitted full natural play in her choice of a lover is actuated, consciously or sub-consciously, by subtler and more elusive influences than those deciding masculine selection. She is innately less hasty and positive than her wooer. Her inclination is to wait. His yearning is to grasp and secure immediately. The unfavored suitor, musing upon his numerous charms, or his tempting income, is amazed, and often affronted, when he sees the coveted object of his desire bestowing herself upon a plain-featured, taciturn, or dull example of his sex, or upon one who is devoid of the faculty of money-getting. And in his astonishment and spleen he denounces the coquetry, uncertainty, and perversity of women.

Just as women suffer torment of the soul in the great emotional upheavals of love, so are men tortured by the tremendous impulsion of passion. In this common conflict the profoundest reciprocal sex misunderstandings, active quarrels, and calamitous repulsions are wont to arise. The jilted lover and disillusioned husband become the woman-hater, and the sworn opponent of feminist reforms. The abandoned, or the slighted, maiden and the disappointed wife find relief in bitter contempt for men.

The very uncomplexity of man's love makes for fatal misapprehension among women. From the woman's point of view it is too powerfully centered upon one purpose. Women constantly reproach us for our imperious ardor, often with justice, but as often without knowledge. Nature has fashioned us for a mighty racial function, and we, like women, are the victims of our organization.

*The persons who think that passion is unlovely, and even shameful, are victims of mental distortion. They are actually in a state of morbid enmity with Nature, and their attitude of*

*mind throws darkness over the whole sphere of beauty, wonder, and spiritual and altruistic emotions.*

#### THE STRESS OF COURTSHIP

Undoubtedly the sway of masculine impulses often leads to errors and serious anti-social acts. Divorced from the refinements of spiritual feeling, consideration for the object of desire, and all the restraints and sacrifices that constitute true love, the physical impulse degenerates into sheer brutishness. Chivalry, honor, unselfishness, and regard for human happiness are utterly disregarded by ill-balanced men who have never known the pure sacraments of love.

Fundamentally, the tactic of the man in courtship is active, and to a certain extent aggressive, while the rôle of the woman is at first resistant, and in a measure passive even after she has been won. The evidence that this is the general rule throughout the animal kingdom, and among human beings all over the globe, is conclusive. Resistance, or the defensive attitude, on the part of woman, her coyness and reserve, serve not only biological ends, but they also arouse the activity and the skill of her lover. When we recognize that this is the great universal rule of the game of courtship we are less liable to reciprocal misunderstandings.

The contest between the vehement wooer and his defensive partner is not without real stress and often torment, even when both are enthused by sincere and fervent love. Courtship is not simply a preliminary. It is a continual preparation for a career of the supremest import to the pair and to the race. The impulse to dominate and subdue the coyly-resisting woman is very powerful in the man, and in morbid forms this impulse may become cruel.

Women who love with their whole beings often confess that there is joy in surrender and submission to a lover. The romantic young girl dreams of the valiant knight, tender and yet strong, who has the power to carry her away. But before a woman can abandon herself happily to the will of the suitor she must feel absolute confidence in his love. The bold lover is usually victorious, because his audacity is a sign to the maiden that he represents her ideal of forcefulness; and the manifestation of power gives her trust in his capacity as a future pro-



tector. I am writing now only of love, and not of the various social or mercenary incentives to marriage.

The combativity of men in the play of courtship is as necessary for the well-being of lovers and the race as the mingled fear, reluctance, and shyness of women. Even an angry lover is not always a repellent object to the woman in love. The instinct of teasing men which is commonly observed among young women, is no doubt aroused by a species of delight in witnessing a man incensed. There is evidence to show that an element of fear is a tonic, and that some women desire it.

It is only when masculinity is extreme, or morbid, that men delight in the exercise of tyrannous strength in marriage. The normally strong and refined man enjoys his power over the woman; but his delight is in the consciousness that she gladly accepts this sway and desires it, and in the satisfaction that his strength is mainly directed to cherishing and protecting his beloved. This sense is akin to that of the mother in the care and upbringing of a loved child.

#### CONJUGAL HARMONY

Upon men devolves the active part in courtship. There is no doubt whatever that wooing after marriage is a more difficult subtle, and elaborate process than the mere preliminary play of attractions. It is an alarming reflection that the vast majority of men learn and practice only the arts of enticing to the altar and the home. When love is beginning, man practically abandons the game.

Innately a man may be chivalrous, affectionate, and tender. Social education, religious teaching, and public opinion may have taught him that his responsibilities as a husband and father demand industry, sobriety, regular living, provision for the family day by day, and scholastic tuition of the children. To these ends he usually works with exemplary energy. He may be liberal in his wife's allowance, anxious that she may enjoy all material comforts, and constantly solicitous for her general well-being. In a word, he may be a typical, worthy citizen, possessing manifest good qualities and considerable intelligence.

What is lacking that domestic life, begun under such happy auspices, by two affectionate persons, proves often a very indifferent success or a flagrant failure? The pair united for

love; they are adequately provided with the necessities of existence; and they possess health and capacity for happiness. In the words of Browning, "wanting is—what?"

The answer must be "conjugal harmony." I do not mean incompatibility in the ordinary sense. The two may be of one mind in most respects and reciprocal in esteem. And yet one or the other is discontented, or both are disillusioned and unhappy. They will either accept their lot with mingled disappointment and fortitude, hiding their secret distress from their dearest friends, and so blunder on to the end of the journey; or they will quarrel, abuse, and actively dislike one another for the rest of their lives, unless they are strong enough to sever the union irrevocably by legal divorce.

Man, the prime partner in passion, the valiant wooer, the sole initiator, is accountable, in the great majority of cases, for the disastrous second act in the drama of love. His very self-assurance of masculine wisdom is the proof of his calamitous ignorance. Promise of paradise is his for consummation. He finds himself clutching Dead Sea fruit. He rails at matrimony; he blames woman; he denounces wedded love as an illusion. He should call himself to account.

It is profoundly instructive that many of the classic ancient treatises on the art of conjugal love were the work of women. Is it not one of the strangest of all social anomalies that man's fundamental duty has been the very one that he least understands?

Men who live in complete chastity are often high-minded and conscientious. But they frequently enter matrimony without the slightest inquiry concerning the psychology of the woman they love. I have known scores of married men whose ignorance in this respect was colossal and almost incredible. It is quite true that affection and tenderness in both husband and wife mitigate to a certain extent the risks of ignorance. *On the other hand, there are many recorded cases of serious physical injury and manifold disturbances due to unconscious errors throughout marital life.*

#### MARRIAGE AS AN ART

Men and women train for every career save marriage. I speak of civilized Western communities; for among savages and

in most Eastern nations there are rites, initiations, and instructions preparatory to union.

Beyond ethical injunctions, no counsel is given in our state of society for insuring that wedlock shall be harmonious for husband and wife in the fulfilment of those functions that concern not only themselves, but the whole community and posterity. Marriage is, however, beginning to be regarded as not merely a contract of the lifelong companionship of a man and a woman, but a matter that deeply concerns the commonweal and the coming generations.

In the physiological and also in the moral sense it is wrong to marry without any knowledge of the art of marriage—that is to say, the art of love. No doubt the flirtations of youth serve in a meagre way to impart to young men and maidens some hints of the real passion of love. But it is a significant fact that in countries where flirting is most prevalent, and almost raised to a cult, the profoundest ignorance of the art of marriage is the rule.

Women who are adepts in coquetry often enter matrimonial life in almost complete misunderstanding of its actualities; while men, for the greater number experimentalists in light amours, are equally ill-equipped for their momentous responsibilities.

*The aversions of wives, the irritabilities, minor nervous disturbances, some of the common- and not a few of the graver bodily ailments result from this ignorance. It is the source of mistrust, the waning of affection, the destruction of respect, the growth of sex-antagonism, and often utter disillusionment with connubial love. Ignorance in this vastly important regard has turned many homes into hells. It is a common cause of separation and divorce.*

Men, perhaps equally with women, endure years of disappointment, and sometimes sheer misery, through this flagrant want of knowledge. So manifold, complex, and widespread are the results and influences arising from this evil that they cannot be even approximately estimated. There is no doubt whatever that life, from childhood to old age, is attended in millions of persons by perplexities, sufferings, errors, sins, and disorders that might be greatly lessened, or prevented and wholly removed, by simple enlightenment. The fathers who neglect to provide suitable instruction for their sons at the marriageable age, and the



mother who send their daughters in utter ignorance to the avocation of wifehood and motherhood, are gravely culpable.

#### QUICKSANDS OF MARRIED LIFE

I have insisted that the nature of love in the sexes differs in pronounced instances. The difference is not in the degree of capacity and intensity, but in form of feelings and expression. Under the right and natural conditions, and with the considerate husband, a wife is capable of all the wedded happiness enjoyed by her partner. Under the same conditions marriage is a success for the man. The conditions are psychic and physical, and not purely one or the other. The perfect blend of the two is imperatively demanded by natural decree.

*Initiation for the woman must be a patient, loving, delicate process. A word even may shatter happiness on the very threshold of conjugality. Bridegrooms should realize that, added to natural coyness, a maiden enters into a new sphere of existence, grievously handicapped by the ignorance that society has encouraged in her sex. Brides should realize that this ignorance on their part, and the timidity and alarm that it induces, reacts upon the husband, who may desire to show every consideration, and that he also may be affected by a sense of inexperience, and rendered nervous and tactless. Men must appreciate the superior fastidiousness of women, and women must reckon with the vehemence of men.*

The loving woman who entrusts herself to a man's keeping, and allies herself to him for the reproduction of offspring, who runs the risk of death itself in giving life, is placed in a terrible situation when the husband knows nothing of her unique psychic nature and her definite needs, rights, and proclivities.

The art of marriage is the art of perennial love-making. More than during courtship and betrothal, a woman requires solicitude, tenderness, patience, appreciation, and wooing when she has linked herself to a man. She responds to affection in marriage as the expanded flower turns to the warmth of the sun. She notes quickly, sometimes with morbid sensitivity, the slightest hint of neglect, the first inkling of a husband's indifference, or the suspicion that she is ceasing to charm. The man who abandons the methods of wooing after wedlock may be

warned that neglect of the art of love often leads to a wife's coldness, and sometimes to inconstancy.

Between 40 and 50 has been called "the dangerous age" for women. The bloom of maturity may be manifestly fading. When the woman looks in the glass she may mark the growing lines upon her face with a passionate regret. This period is often a graver crisis than adolescence with its dawning of love longings. Sometimes, when the trial is over, there is a re-blossoming of love in the woman's heart. Almost always a woman is wont to be restless and dissatisfied during this arduous spell.

Many women at this crisis develop aberrant fancies. They find their husbands distinctly lacking in attraction. There may, or may not, be cause to believe that the husband is indifferent or disaffected. In any case, the suspicion takes root. Sometimes the husband's love remains undiminished, or it may have deepened with long association. Nevertheless, the wife yearns to live alone for a period; or she may discover a sudden violent infatuation for another man, often much younger than herself.

All a husband's patience and kindly tact may be necessary during this trying period. Often there is but little disturbance of mental balance and no serious physical symptoms. Close attention to diet, rest, judicious moderate exercise, congenial occupation, and the avoidance of exterior worries will greatly mitigate all discomforts and pains of the climacteric.

#### DESTINY OF WOMEN

The art of marriage for women begins with an earnest inclination to comprehend the physical and psychic nature of the man to whom she has pledged herself.

A young wife who wishes to retain her husband's love and admiration should recognize that the selfishness of man, as often shown in the affairs of daily life, is not infrequently a want of reflection rather than a defect of virtue. She should not imagine that a preoccupied or silent, pensive mood in her companion is necessarily a sign of his indifference towards her. If he sometimes omits to kiss her, when she is in the humor for tenderness, she should not distress herself unnecessarily with the doubt that his affection is cooling. Olive Schreiner refers to this apparent indifference, that arises recurrently in men, as a source of aston-

ishment to wives. Such seeming apathy is often nothing more nor less than absorption in schemes of work or business.

Realizing that the senses are acute in man, a wise wife will study the same arts of attraction that she exercised before marriage. She will incite her husband to fall in love with her repeatedly. In happy marriage both partners frequently discover new charms and virtues in one another, and courtship continues for life. Dowdiness and untidiness repel many men, though some are almost indifferent to dress.

Woman is the universal consoler of mankind. To her we turn, when errant and penitent children, for her kindly compassion and counsel. In manhood we seek her pity, her aid, her consolations. She has the supreme gift of solace. Many a man, wounded in the combat of life, feels healed and strong again when a loved woman holds him to her and bids him take courage. Let women recognize that a man in love is easily influenced by affection, and that he, like them, is susceptible to the pangs of indifference or neglect.

I hold that the re-making of society on a grander human plan rests chiefly with the intelligence, the intuitive faculty, insight, sympathy, and fine courage and devotion of woman. Only the education of woman must be broadened, and should include biology, physiology, and psychology.

Our first deep impressions are received from woman. She is the mother, teacher, nurse, and healer. Her beauty and her love are the chief incentives to activity in manhood. We fight the world to win her smile. Men are frequently as women shape them in childhood, in youth, and even in maturity. There is no limit to the potential influence of woman upon society.

Laplace, pointing to the volumes representing his life's work in science, declared all this was as nothing compared to the love of woman.



## CHAPTER IX

### MARRIAGE

#### A SHORT HISTORY OF MARRIAGE

**I**T IS supposed that marriage has gradually passed through several stages of development: 1. Promiscuity; 2, Polygamy and Polyandry; 3, Monogamy.

(1) There is a great difference among authorities as to whether promiscuity was ever universally practiced or not. Though the ancient Greeks claimed marriage was introduced by one of their mythical heros, before which time men held their wives in common. If there is any truth in the Darwinian theory, that man is descended from a monkey-like ancestor, promiscuity must have been a predecessor of the family group. All apes are promiscuous.

In some of the Pacific Islands (Tahiti), up to a century or so ago, there was a secret society called the *Areoi*, the members of which gave themselves up to promiscuous sexual orgies. The membership was limited, and was accordingly looked on as a great honor. In fact, one chief who was brought to England by Capt. Cook, the explorer, said he considered himself the equal of the British king, because he had been admitted.

One argument urged in favor of the existence of promiscuity in the early history of mankind, is the custom of motherhood (motherright, or matriarchate). That is to say, the man enters the woman's community, and the children belong to her. This takes as the corner-stone of the family and of Society, the one certain fact in all relationships (as Ratzel expresses it), the kinship of children to their mother. In such cases the father is even named after the child. Thus the father-in-law of the famous African explorer, Livingstone, was called "the father of Mary." This practice was widespread among savage tribes, and traces of it still linger even at the present day in out-of-the-way corners of the globe. Motherhood was generally prevalent in the Indian tribes, east of the Mississippi.

Fatherhood (fatherright or patriarchate) may develop on oc-

casions when the father is able to accumulate property, flocks, herds, etc., by his own labor. Obviously this would in such case belong to him.

Among some savage tribes the marriage bond is so loose, one might almost say there is promiscuity.

(2) Polygamy—or plurality of wives—is- and has been widespread among barbarous and semi-civilized peoples. One reason assigned for the custom is in some countries there are no animals capable of giving milk, hence the children must be nursed by the mother for several years. As lactation generally interrupts the process of menstruation and ovulation (discharge of eggs), the sexual desire as well is usually lessened or absent for this lengthy interval, hence the husband would be deprived of sexual gratification if he had but one wife.

From a physiologic standpoint there is some truth to this—among the lower animals, once the female has passed through the term of “heat” and is pregnant, the sexual desires of the male are abolished till the breeding season of the following year; this is not the case, of course, with the male of the human species.

Michels remarks that the phenomena of habituation to monogamy are seen only in the later stages of married life, for the male is unquestionably characterized by polygamous tendencies. Even woman, as a rule, is not free from polyandrous inclinations. Nevertheless, her erotic sensibilities are much less developed than those of the male, for a prolonged and severe suppression of sexual manifestations during the period of virginity has produced its inevitable result. There are women, moreover, whom the austere education given by the Church has had the effect of rendering, up to a certain point, independent of the male in sexual matters. But with men it is very different. Although for a short time, or even for considerable periods, a man’s sexual affections may appear to assume an exclusive and monogamic form, it is Nature’s will that the normal male should feel a continuous and powerful sexual sympathy towards a considerable number of women.

It is curious to note that wild ducks have but a single mate, but the tame ducks of the barnyard are polygamous; with domestication their morals have become depraved. The domestic pigeon, on the contrary, mates for life.

Even in polygamy, the first wife ranks highest, and her offspring as a rule inherit the estate.

In Paraguay, early in the seventies of last century, as a result of the 5-years' war with Brazil, it was estimated there were 250,000 inhabitants, about 200,000 of them women. Such excess of females, as the result of infanticide, war or slavery, was the most important cause, probably, of polygamy. After the 30 Years' War (1618-48) in Germany, the inhabitants were so few that two wives were allowed; and it will be remembered that a similar proposal has been advocated recently as a result of the World-War.

In India, even, about 95 per cent. of the inhabitants have but one wife, and in Persia the per cent. is still greater (98). The reason for this is that plurality of wives is nearly everywhere a privilege of the ruling classes (princes or chiefs) and wealthy men. Single marriages are the rule, where as among the Eskimos, it takes an unusually skilful hunter to support more than one wife.

Polyandry (many husbands) is not found generally, mostly where female children are killed (infanticide) or sold. Among the tribe of Todas (India), all the brothers in a family have the same wife in common. The first child is attributed to the eldest brother, the second to the next, and so on down. Said to be a very satisfactory arrangement, as a rule!

(3) Monogamy has been more or less generally adopted by all nations and tribes, as soon as they reach a somewhat high rank in the scale of civilization. The French author, Letourneau, gives as his opinion that of the great causes which have led to the adoption of single marriages, the first is the equality between the sexes which occurs so soon as it is not disturbed by the casualties of savage life.

He also points out that all over the world, in all races, and at all times, we find examples that in the middle age of civilization, the rights of parents over children—especially over daughters—included in all countries the right to sell them.

Marriage by capture and by purchase each had their advantages and disadvantages. Capture cost nothing, and it procured wives and concubines over whom the captor had every possible right; but in practice it was not free from danger, and once car-



ried out it exposed him still to revenge and retaliation. Men, then, became resigned to the purchase of the wives, as soon as they could dispose of some exchange values. The "best man" at our modern weddings is a relic of the old days of marriage by capture. This latter, by the way, still survives here and there in a mock form, as among the Arabs.

Marriage took place in ancient Greece in the winter time, and the month corresponding to our Jan. 15 to Feb. 15, was in great favor, so much so its name in Greek meant "the month of marrying." The period of full moon was most fashionable. The Roman bride when being dressed for the wedding had her hair parted by a spear, a relic of marriage by capture. In the wedding procession to the bride's future home, nuts were thrown among the spectators, instead of rice as in our day. Both these are supposed to be for the purpose of propitiating evil spirits by feeding them.

To notice and describe all the queer customs connected with the marriage ceremony would require a book several times the size of this one, but a few may be referred to in passing:

In some parts of Southern Germany, the bride weeps all the way back from the church; the theory being she has wept so much there will be no occasion for it in her future home.

"Trial marriages" were common in Europe in the Middle Ages, and persisted in the Isle of Portland (England), even up to—and into the 19th century. If any children resulted, they were regarded as true heirs as if born in wedlock. "Partial marriages" were found in North Africa (Nubia), and may still survive there. The wife belonged to the husband only one day out of four, on the other three she could do what she pleased.

There is some reason for believing that marriage at first was only temporary, and that family life as we know it was of slow growth. A great factor, no doubt, in the development of the family is the fact that the young of human beings are dependent on the parents for years, and not for a few weeks or months as in animals.

One of the most extraordinary customs was that called the *couvade* which was found among some Indians of the West Indies and South America, and it is claimed also on the border between France and Spain.

Among the Caribs of the West Indies, as soon as a child was born, the mother washed it, and then went about her household duties. The father, however, took to his hammock, and was fed only on soup for ten days, then allowed to eat a little tapioca. In six weeks a feast was had, but the father not allowed to take part, nor was he permitted to get up for several days, and for the first six months after doing so could not eat either poultry or fish.

The object is not clear, it may have been to recognize the fact the father had a part to play as well as the mother in conception and the pregnancy following.

Among uncivilized tribes the views as to sexual morality differ hugely: In some the greatest license is permitted between the unmarried, while other tribes put a girl who has been guilty of bastardy to death. Still others allow the greatest freedom *after* marriage, and in some the wife is loaned to guests, either as an act of hospitality, or for gain. Other things being equal, where loose marriage customs prevail there is no jealousy.

#### WHO SHOULD MARRY?

There are some half-a-dozen requisites for a satisfactory—therefore happy—marriage, to-wit: 1, Proper Age; 2, Good Health; 3, Physical Contrast; 4, Mutual Affinity; 5, Mutual Desire for Offspring; 6, Religious Opinion in Common.

(1). Other things being equal, it is best that the contracting parties be physically and mentally mature, that the ends of the bones have become finally joined to the rest showing that the growth of the skeleton is finished. On the average for temperate climates this will be about 22 to 24 years. Though some years back a young woman of New York City marrying into the English nobility at a comparatively early age, led a medical journal of that town to issue some warnings as to the dangers of childbirth before the hip bones through which the child is born were completely joined. Apparently no bad results followed, but "one swallow does not make a summer" here, anymore than in other walks of life.

Tannenbaum believe that, without exception, the greatest obstacle to early marriage is the great probability of parenthood and the expense, responsibility and sacrifice associated with the rearing of children.



The time when our progress depended largely on our instincts for self-preservation and reproduction for our success in the struggle for existence has largely gone. Such instincts, writes Corner, we possess with the lower animals. For success in life we have to conform to the laws evolved by our forefathers which have been successful in producing our present state of society. One result is that marriage can only take place among the middle classes, about 30 years of age. As a part consequence modern families are small compared with those in former times, and from the practice of 'suppression of fertilization' [birth control] still small. This has at least two important consequences: The secondary sexual characters of females have become intensified by fashions, which are the recognized means of attracting the other sex; and all have to develop more nervous control than their predecessors had; there is, consequently, more strain on the nervous system, hence a greater number of nervous failures. Success in life means both intellectual and sexual success much more now than it did in the past, when sexual energy meant success in vice as often as in virtue. Intellectual success means success in virtue, and is relatively more frequent nowadays, as social development necessitates nervous restraint for people to succeed.

So far as late marriages have to be considered, Heape, the English biologist, observes: Changes of temperament due to physiologic changes in the body will occur at any period of the life of a married woman, although they are most marked between 40 and 50. Married life when the two partners are equally set in their habits, is even more full of danger than at an earlier age when both are more plastic.

But the most powerful argument against late marriages, especially for women, is they are less likely to bear children. The physiologic habits acquired during a long period of spinsterhood may so affect the reproductive system that even a healthy woman may be deprived of the power to reproduce. Even if she does bear a child the duties of maternity will usually be less easy to perform than when she still had the nutriment stored back during a healthy girlhood to fall back upon, and thus her offspring will have less chance of a normal, healthy life. [To this we would add that life insurance statistics prove the "expectancy of life" that is to say the average number of years possible at a given



age, is much less of course, at say 45, than 20 years younger, hence the danger the mother may not live to bring up the child properly.]

Heape comes to the conclusion that for the majority of men early marriage is the only alternative for either a repression of natural desires, which is bad for them; or for an indulgence of them on irregular terms, which under the conditions now prevailing in civilized communities, is constantly associated with suffering and disease.

(2) Good health of each of the contracting parties is absolutely essential. Even with a perfectly healthy state of the body, the trials of married life are sometimes undergone with difficulty, and this is very hard or utterly impossible when husband or wife are suffering from some physical ailments as well.

Medical examination before marriage may show the bony framework of the woman is such that it is impossible for her to bear living children, and marriage should be refrained from. This may seem harsh, but is probably better than for the woman to lose her life in childbirth, or suffer injuries from which she remains a life-long invalid, maybe confined to bed.

(3) By "physical contrast" is meant that a thin and a fat partner, a tall and a short one, will probably be more satisfactory than for both to exhibit such extremes.

(4) There should be some degree of mutual affinity, whether this may be called magnetism, or whatnot, or be dignified with the name of "love." This is the reason why in marriages of expediency (*mariages de convenance*) so common in France especially, are often unhappy, here the wishes of the contracting parties are not consulted in the least, the nuptials are decided on by the respective parents because the farms join, or the financial standing of the two will be elevated. It is the reason, too, why royal marriages are often unsatisfactory, the union being regulated by various dynastic—and geographic—reasons not by affection.

Here the story of the "blue stockings" occurs to one: In the days before short skirts were the fashion, a man seeing a young woman alighting from a street car fell in love with her, so the story goes, simply on catching a glimpse of the blue stockings which she wore and for no other reason whatsoever. Not a

very satisfactory basis, it would seem, for substantial marital happiness!

Under this head it is desirable as well that the sexual propensities be as evenly balanced as possible. When the husband is ardent, and the wife cold-blooded and frigid, nothing but discord can be expected. Though it is not clear by any means how this balance can be determined in time.

(5) When one partner is a great lover of children and hopes for a family of their own, while the other does not care for offspring, but little chance of conjugal happiness would seem in prospect.

(6) There is considerable danger of discord also when husband and wife are of different religious faiths; or one is religious and the other belongs to no faith. Especially is this true of alliances between Christian and Jews, and probably between Protestants and Catholics; though in this latter event we believe the non-Catholics must agree that if any children result they are to be reared in the Catholic faith, before the marriage can be solemnized.

When all is said and done, this question of marriage is a good deal like the old Indiana proverb (or is it Ohio?) "All signs fail in dry weather." We have in mind three marriages of prostitutes, and to all outward appearances the unions were as happy and satisfactory as any others; though it is noteworthy that in none of the three did any children result.

#### WHO MAY NOT MARRY.

Some of the principal obstacles to a successful marriage are the following:

*Syphilis.* It is estimated that the average case of syphilis when not treated, is capable of being transmitted for at least 5 years from the original chancre. Therefore, at least 5 years must elapse after the original sore which marks the start of the disease. It is presumed that at least three years' treatment has been taken under the advice of competent physicians. A series of tests at regular intervals, say four times per annum (Wassermann tests) must all be negative.

*Gonorrhea.*—First of all, of course, the discharge must have stopped for a considerable time. The urine passed must be clear

with no fragments or particles in it. It is customary for the doctor to press the prostate and the little bags under the bladder (seminal vesticles), massage them in other words. The fluid forced out is then examined under the microscope to find if it contains the germs causing the disease. This is to be repeated a couple of times, or better still on three different occasions.

*Consumption.*—This is not hereditary, strictly speaking, but the tendency is. Other things being equal, a patient with advanced consumption should not marry; but as doctors well know, the sexual desires of such individuals are frequently greater than the average in health, and they often contract matrimony. Once married they are worse, of course, for the excessive intercourse is too much for their strength and the disease makes rapid progress. For the woman, the danger of pregnancy is great, and after the birth of a child the disease often lights up as it were and soon carries off the unfortunate victims.

*Heart Disease.*—Patients with disorders of this important organ, should refrain from sexual commerce, hence from marriage. Any number of sudden deaths during copulation occur every year with patients suffering from heart affections.

*Epileptic Fits.*—This is a grave defect in one partner, and if both the contracting parties are epileptics, marriage is out of the question, and should be so decreed by suitable laws.

*Marriage Between Relatives.*—This is practically limited to cousins (either first or second), nephew and aunt, or niece and uncle. There is considerable misconception on this subject in the popular mind, matings between first cousins being supposed to result in feeble-minded or deaf-and-dumb children. Nevertheless there is no foundation for the idea, provided the family history of the contracting parties on each side is good. Where there is any defect, such as unsound mind and so on, there is, of course, a great chance of the defect being handed down just as would be the case where there was no relationship whatever. In ancient Egypt, the kings even married their own sisters, and so far as known with no bad results. As a matter of fact, the practice continued for a long time, if there were any evil effects, the practice would evidently have been abandoned.



NO MARRIAGE LICENSE WITHOUT A CERTIFICATE OF FREEDOM  
FROM TRANSMISSIBLE DISEASE\*

Among the most wonderful phenomena of the present age is the spirit of unrest among the female members of the human race. Whether or not woman suffrage will prove the panacea that its adherents believe it will, or whether its universal granting will put progress back half a century as its opponents believe it will—one thing is sure: Woman refuses to remain the doll, the child, the slave that man wanted to make of her; woman is awake—if not fully awake, she is opening her eyes anyway. And she demands the right to dispose of her body as her own and not as her husband's property. She wants to know what is to become of her body when she enters the bonds of holy matrimony, for she has heard that not all is well in that sacred kingdom, in that ardently desired for paradise. She has heard some of her women friends cursing instead of blessing the day when they changed their maiden name for that of their husband. And they are beginning to ask for particulars, for details. And well it is that they are doing so.

For too many years, for too many centuries, woman has been outraged, infected, sickened, invalidated, incapacitated for life, and often driven to an early grave, by the man who promised to love, cherish and protect her. Very often he did it in sheer ignorance—he didn't think he could infect anybody, he thought he was perfectly cured, or he forgot all about ever having had a disease. "It was so long ago." Sometimes he did it with perfect knowledge of the possible consequences, and in spite of the distinct warning of the physician. He married in the dangerous, infectious state, because he wanted the woman's money, or it was inconvenient to delay the wedding, and so forth.

But whether infected through the husband's ignorance, through his carelessness or through maliciousness, the disastrous result was always the same, and woman is getting foolish enough to refuse to continue to be a victim of man's ignorance and brutality. She begins to object to being infected a day or a week or a month after the wedding. She is beginning to ask—or we are beginning to ask for her, for the liberation of the slave never

---

\* Dr. Wm. J. Robinson in *Eugenics and Marriage*. The Critic and Guide Company, New York City. (See advertisement last page.)

came through the slaves themselves, but through the fighters for liberty, through the humanitarians—some guarantee that the marriage bed will not soon be converted into an invalid bed, that the wedding march will not be a prelude to an early funeral march.

Before discussing the matter any further let me give you the histories of a few cases:

*Case 1.* A pretty brunette, twenty-two years old. Married three years and two months. Exactly one month after the wedding—she remembers the happy day—she began to feel pain and burning in the vagina, pain on urinating, etc. She has been under treatment by various doctors ever since. She will never get well without an operation, because both Fallopian tubes are swollen, distended and full of pus. And if she has the tubes removed she will, of course, never have any children. It may also be necessary to remove her ovaries.

*Case 2.* Age nineteen. Married two months. She must have become infected on the very wedding night, for ten days after the wedding ceremony all the symptoms of an acute gonorrhea were in full blast. Fortunately the husband was well-to-do; she could afford almost daily treatment at the office, the home part of the treatment was carried out by a competent trained nurse, and in three months she was well. But it cost her a lot of pain and suffering and a pile of money. The poor can afford the former, but not the latter. How soon she will be able to have a child is also a question.

*Case 3.* Age twenty-eight. Married five years. Began to ail two weeks after marriage and has been an invalid ever since. All that time she has had no treatment, for the husband happens to be a cruel, contemptible brute. He told her she did not need any treatment. "It is natural for a woman to be sick after marriage," and it was no use wasting money on doctors. But finally she became so haggard-looking, got so thin and feeble that her people insisted on her seeing a doctor. She came with her husband. Of course it did not take long to find out what the trouble was. I asked for a private talk with the man, who at first strenuously denied ever having had any venereal disease; but when I told him that it was no use lying, that I could find out in a minute by examining him whether he had or not, he confessed that he had had gonorrhea, but he was sure that he had been cured when he married. I examined his urine and found it full of shreds and gonococci. When I told him that it was a crime to ruin a human being like that, without even trying to cure her, his excuse was that he was afraid to send her to doctors; he was afraid they would tell her what the disease was, and as his and her parents were strict Catholics, he feared there might be trouble. And so for the fear of a little unpleasantness, he risked and ruined the life of the woman whom he had promised to cherish and protect. For she will never be a healthy, normal human being. Her entire generative organs—womb, the ovaries and the Fallopian tubes—must come out, if an attempt is to be made to save her life. And she may not be able to stand an operation—so weak, so anemic, so miserable she is.

It is interesting to spend a minute or two in a consideration of the feelings of the infected wives towards their husbands. I used to be surprised to notice the good-natured, forgiving attitude towards their husbands of wives who had undergone years of



suffering on account of them. But I no longer am surprised—for I see it so often. Not a grudge, not a resentment. But only in cases where the husband was kind and comradely to the wife, made a clean breast of things and did everything within his financial power to cure her. Such were the cases Nos. 1 and 2. The husband in case No. 3 was just the opposite—he was a low, contemptible brute, of which we have not a few, and his wife, on finding out the true state of affairs, did not hesitate long in making him know clearly and distinctly her true feelings.

*Case 4.* Age twenty-eight. Married four years. Three months ago gave birth to a child, after a very difficult labor. The child was afflicted with ophthalmia neonatorum and is now completely blind in one eye. Only after the greatest care and attention was the other eye saved. Since giving birth to the child she has been a very sick woman, running a temperature of 101 to 103 degrees Fahrenheit and losing flesh rapidly. She has had no intercourse since. An examination showed the presence of an abundant ichorous discharge, containing numerous gonococci. There can be hardly any doubt that she became infected soon after marriage, but the disease was of a mild, dormant character, as it often is in women; but as is also often the case, pregnancy and labor stirred up the activity of the gonococci, the numerous raw surfaces offered a favorable soil for the growth of the germs, and she got a severe acute infection. From local the infection soon became systemic and she died of gonorrheal endocarditis.

*Case 5.* Age thirty-six. Married fourteen years. Has had *nine* miscarriages and three children, one of whom died within a few minutes, and the other two within three days after birth. The woman is very anxious to have a child, as so many good women are, and though the husband knew that he was strongly syphilitic, and that he infected her, he did not intimate to her that there was anything the matter with her, and did not suggest that she needed treatment. The woman was considerably run down, but under proper treatment she gained rapidly in color, flesh and strength. She asked if she could soon have a living baby. I told her yes. *But* I told her it would be best for her not to have any babies just now, because the child might be born sickly, deformed or die in early infancy. Of course she would rather die than bring into the world a sickly, deformed child, and she will take good care that she does not do it. After two or three years of constant, honest treatment, if all the symptoms and signs are negative, she might run the chance of giving birth to a child. What has that woman's life been but one continuous round of misery, suffering and disappointment? All because the husband married her when he was in a florid, infectious stage of syphilis, and because he knew that infecting and ruining the life of his wife carried with it no penalty.

*Case 6.* Age thirty. Married nine years. Presents a horrible sight. Became apparently infected within the first month of her married life, for she remembers that she had a severe rash all over her body about two months after she was married. A homeopathic doctor was then consulted and he told her it was due to measles. Now her nose is deeply sunken, she has an ulcerating gumma on the left collarbone, an immense ulcer on the left leg—occupying almost two-thirds of the circumference of the limb—and a smaller ulcer on the right leg. The soft palate is ulcerated through, and her voice is, of course, extremely unpleasant. She has had several miscarriages, but unfortunately she gave birth to two living children also. Both are puny and sickly, one has a bad cataract on one eye, and the



other is already showing signs of epileptic fits. Both are mentally below par, and if they are not fortunate enough to die at an early age they will grow up to swell the army of deviates, defectives and degenerates. Perhaps they will belong to the class of the criminally insane and will end their lives in prison.

*Case 7.* Pretty, charming, intellectual Mrs. X. Thirty-three years of age. Married five years. She married beneath herself socially and intellectually. But she was getting on in years, she became possessed of that unreasonable fear of remaining an old maid, and—the chief reason—she had a strong maternal instinct, and was “just crazy” to have a child. People do not suspect how strong this instinct is in many women. I did not suspect it myself until I saw it in my own practice. And many men would be painfully surprised if they knew the real reason why their wives married them; in many cases, I repeat, it is simply the irresistible desire to become a mother. And as they see the time passing, passing, they become seized with a subconscious fear of never becoming a mother, and then they accept the first “reasonable” offer, a man who may be very far removed from their ideal. As a rule such women are rather cool to their husbands and pour out all their love and affection on their children; they fill out their whole life. As I said above, Mrs. X married Mr. X principally because she wanted to be a mother. Imagine her disappointment, then her chagrin, then her despair, when year after year passed and no sign of a child. Without her husband’s knowledge she had herself examined and was pronounced healthy in every respect. She disliked to broach the subject to her husband, but so strong was her desire for a child that she overcame her reluctance and spoke to her husband, who pooh-poohed the matter, but she insisted and he came for an examination. She came with him. A most painstaking examination showed that he was free from gonorrhea, nor were there any signs of syphilis; in fact, he was in excellent health. A further examination, however, revealed the existence of a former gonorrhea. To the question if he ever had gonorrhea he answered in the affirmative, and further questioning also brought back to his memory the fact that he had had a bilateral epididymitis. It then became clear why Mrs. X never became pregnant. To her anxious question whether she could have a child I was obliged to answer that it was not likely; that at any rate it would require long, long treatment. And here she broke out in sobs and her tears came down in torrents. She tried to restrain herself but could not. It was a pitiful picture! One could see that she felt that she was cheated—cheated of her hopes and expectations and ambitions.

*Case 8.* This case is very similar to the preceding one, as far as the wife is concerned. For ten years she was praying for a child, but her prayer was not answered. She was examined a number of times and found all right. The husband did not consider it necessary to have himself examined. At last she prevailed upon him. He denied ever having had venereal disease, and on examination I found that he was telling the truth. But I also found that he had but one testicle (monorchid) and that his “semen” was entirely free from spermatozoa. And here I was obliged to tell them that there was not any hope of their ever having children, that treatment would be useless and a waste of money. She did not break out in tears and sobs, but her face was a study worthy of the brush of a great painter.

*Case 9.* Age thirty-four. Married seven years. Sallow, dingy complexion, anemic, poor appetite. Husband complains that she has been getting very cranky and irritable of late; almost impossible to get along with her. As a girl and in the first years of married life she was of a kind and amiable disposition and very submissive. A diplomatic questioning and examination of each spouse apart elicited the sad fact that the

husband is almost completely impotent. He was suffering with frequent night emissions before marriage, and it was as a cure for this condition that a doctor advised him to get married. And he did follow this stupid, criminal advice and got married without undergoing any treatment. And his condition has been getting worse and worse since marriage, so that now both libido and potentia are almost completely absent. During her entire married life the wife has not had sexual satisfaction once. The first two or three years she did not mind it, as she had practically no desire. But with the awakening of her sexual instinct she has been suffering quite pronouncedly, and lately, she told me, she had begun to feel as if she could not stand it any longer.

*Case 10.* Age twenty-nine. Married five years. This case is similar to the preceding one. The wife came to find out if there was any reason why she could not have any children. An examination disclosed the astonishing fact that she was still a virgin with intact hymen. Further examination disclosed the reason why: the husband was completely impotent; while libido was present, and the semen proved normal, *potentia coeundi* [ability to have intercourse] was entirely absent.

*Case 11.* She had some misgivings on accepting him, as she feared that her money and her position might be some factors in his ardent wooing. But he was so nice, so strong, and so gentlemanly that she accepted him. Even before the honeymoon was over she began to perceive that he was not a paragon of virtue. The chief trouble was with his love for drink. He restrained himself at first, but later on he gave unrestrained license to his appetite and then he would break out in uncontrollable fits of passion. In short, she saw very soon that she had to deal with a confirmed dipsomaniac. And now her only anxiety is not to have any children from a drunken father. But she did become pregnant, and she is bearing the child in anguish, in fear that it will be born abnormal or that it will grow up a drunkard. She was determined to get rid of the fruit of her womb; whether she changed her mind or whether she succeeded in her determination I don't know. But her life is ruined.

*Case 12.* When she married him she had no idea that there was anything wrong with him. Several months after marriage she discovered that he was suffering from mild epileptic attacks. He has had those attacks since childhood, but he did not consider it necessary to disclose the fact to her. She has had three children with him. One, a girl, seems to be quite normal; of the other two, who are boys, one is subject to epileptic fits, and the other is a high grade imbecile. He shows signs of moral depravity, is cruel to whomever or whatever he can be (to animals particularly), and when he grows up he will probably commit one or more crimes before he is made innocuous. The feelings of that mother in general, and her feelings for her husband, can be better imagined than described. And still she is unable to free herself from his importunities, she cannot leave him for various reasons, and but for the fact that she at last learned the use of the proper means of preventing conception, she would be bringing into the world more epileptics, more imbeciles, to swell the vast overflowing ocean of misery, wretchedness and crime, in which we are already wading knee-deep.

*Case 13.* Mrs. N. N. No more pitiable tale could be told. A thousand times better had she never been born or had she died in infancy or had she committed suicide. For she is now a paralytic imbecile, confined to a state institution for the insane, a torment to herself and all those about her, her relatives praying for her death as a deliverance from her suffering. And she was a nice, bright, lively woman! But the husband infected her with syphilis, she received no treatment, until the symptoms became



so prominent that they could not be overlooked; the disease was in a virulent form, and now she is a victim of general paralysis of the insane, and it may be two or three years before Death, the deliverer, will come to her and end her sufferings. The husband has escaped any brain involvement so far. Probably because he took energetic treatment. He may still become a victim to this, the most terrible sequel of syphilis. And I don't know if it would not be poetic justice if he did. Not because he infected his wife, but because, on account of his miserable cowardice and selfishness, he did not see to it that she got proper treatment, though he knew full well the gravity of the disease.

But to return to our subject. *All this misery, multiplied by a hundred thousand, could be eliminated by a very simple means; by demanding from each male applicant for a marriage license a physician's certificate of freedom from every transmissible or at least from venereal or mental disease.* I know that there would be a great deal of opposition to the enactment of such a law, but with public opinion thoroughly awakened and in favor of it, few legislators would dare publicly to oppose it.

I know the objections that are likely to be raised. One is that the candidates would go to unscrupulous quacks who would for a few dollars give them the desired certificate even when they were in the infectious stage. But this can easily be obviated by demanding that the certificate be signed by a reputable physician. No advertising quack is considered a reputable physician and no reputable physician would risk his standing by giving a false certificate.

Another objection is that the candidates could go to another State and get married. If all the States had such laws then, of course, the candidate would have nowhere to go; but even before all the States pass such laws this can be easily obviated by declaring null and void a marriage between citizens of a certain State who in order to escape the requirements of their State law went into another State to get married. This is actually done in Indiana. Residents of the State of Indiana who go into another State to get married, and return to Indiana, are subject to penalties, and have their marriage declared null and void.

The mere presence of such a law on the statute books would have a wonderful educational effect. The young men, knowing that before they could hope to get married they must present a clean bill of health, would be exceedingly careful in their sexual relations, would use much greater precautions to avoid venereal infection; and having had the misfortune to become infected,



they would at once seek the most competent and most energetic treatment. And even without passing such a law, if merely the idea became common, many young men would consider it their duty and their wish to have themselves examined before entering matrimony, and bring a certificate of freedom from any transmissible disease to their respective brides. It is being done now among certain people, but the number is still too small to have any appreciable effect on the post-marital incidence of venereal diseases. However, it is becoming more and more common.

I might also say that the custom now prevailing in the better families of having the prospective bridegroom take out a life insurance policy for a considerable amount of money is done not only for the purpose of protecting the young wife in case of the husband's premature death, but also for the purpose of ascertaining his physical condition. The bridegroom's prospective parents-in-law do not say brutally that this is the purpose, but the bridegroom understands it. Unfortunately the life insurance examination cannot generally determine the presence or absence of gonorrhea or syphilis, except when those diseases are present in too self-evident a condition—for the life insurance examiner does not express the prostate to examine the prostatic secretion, nor does he perform the Wassermann test to ascertain the presence or absence of syphilis.

I stated that a certificate of freedom from venereal disease should be demanded from every male applicant. Some might ask, why not also from every female applicant, and those who are for equality of the sexes cannot see why the woman should be given privileges which the men do not possess. Theoretically there is no reason why it should not be so, but we live in a practical world and every reform advocated must have a sane, rational foundation—and the reason why I say that it is not necessary to demand a certificate of freedom from venereal disease from every female applicant is because the proportion of infected women to infected men, speaking, of course, of the respectable classes, is as one to one hundred. The difference may even be greater, and it seems to me absurd to subject a thousand women to vaginal examinations in order to perhaps find one who is infected. Of course, should our women become as emancipated as the men, and should they adopt the same sexual standard as

the men, and should venereal disease among our unmarried women become as common as it is among the men, they then should be required to furnish a certificate just as well as the men. But what I said applies only to the certificate of freedom from venereal disease. As concerns mental diseases, such as insanity, epilepsy, and so forth, the requirement should now apply to women just as well as to men.

One section I would incorporate in this law—such provision exists in Norway, and there is no reason why it should not exist here—namely, that knowingly infecting a person with venereal disease should be considered and punished as a felony. It should not be necessary to prove malice, the mere fact that the person knew that he had the disease and concealed the fact from his or her partner should be sufficient for a conviction, and for rendering any marriage null and void.

It might be objected that many mental diseases, or mental taints rather, cannot be detected by an examination, and therefore many people in whose families there is feeble-mindedness, insanity and epilepsy would still be married, but this possibility would be obviated by the requirement that all candidates for marriage make a sworn statement that there has been no mental disease in his or her immediate ancestry. Of course, swearing falsely would subject the parties to the usual penalties for perjury.

How about people who, knowing the exact condition of their partners, decide to disregard all risks and to marry in spite of possible dangers? Would I or would I not permit them to marry? This brings up an entirely different question. Provided there is full knowledge on both sides of the true state of affairs, I would permit them to marry—but with one condition, that under no circumstances should they bring forth children. As long as there are no children the State has no right to interfere with the private affairs of two individuals. But this is another story, a story for another essay.

To show how rapidly the sentiment for the health certificate as a prerequisite to the marriage license is spreading, it is sufficient to mention that in several States that have no laws on the subject a number of prominent clergymen announce that they will not perform the marriage ceremony unless such a certificate is brought to them. We thus see that the discussion

and agitation of public questions do have a great influence, and are necessary preliminaries to the enactment of any laws. In fact no law is worth very much that has not behind it a strong public opinion formed by previous discussion, and our friends who sneer at talking, and always want that something be doing, are unnecessarily impatient. Talking is also doing. A word is a deed. It is often more important than the deed.

#### BENEFITS OF MARRIED LIFE.

It has been known for some time, especially by life insurance companies, that married persons live longer. The death rates for single men between 30 and 40 years old may be almost two times as high as those for their married companions; as age advances, however, the percentage lessens. For single women also the rates are higher, except from about 20 to 42 or 45, when the period of childbearing increases the mortality among married women.

Philip and Murray believe, so far as married men are concerned, the reason for their remarkable longevity is not the frequent gratification of the sexual desire. Rather must it be taken for granted that their more orderly and regulated mode of life, their average less abuse of alcohol, and the relative infrequency of venereal infection and its consequences, are the factors which play the principal part.

Even crime and suicide are less common among the married. Some time ago, the inventor of the celebrated method for identifying criminals, Bertillon (of Paris), made several investigations on this point, and found of 1,000 individuals accused of various crimes, 508 were bachelors, but only 398 married and 94 widowers. For men, of every 100 married men accused of crime, there were 170 bachelors or widowers; and for every 100 married women, 245 unmarried or widows. Lastly, for every million inhabitants in the population of France, 628 bachelors suicided, and 273 widowers, against 246 married men.



## CHAPTER X

### BIRTH CONTROL

A DOZEN or so years back we heard a great deal about "race suicide," but this was soon replaced by: "Not more babies, but *better* ones."

We are reminded here of the fable about the eagle: The mother bird lays but two eggs, and the one in the fable had hatched only one of the pair. She was made fun of by a clucking hen with a dozen downy chickens running after her, but drawing herself up, she answered Biddy: "It is true I have but one young while you have a dozen, *but mine is an eagle.*"

What is to be hoped for from such examples as the following:

Some time ago a case was reported in Canada, in which a woman not 30 at the time had had no less than 17 children; this prolific marvel bore triplets twice, and twins three times. A Bohemian in Chicago, was asked in court (Nov. 14, 1920), to tell the names of his children, and after considerable urging replied that he could recall those of 15, the names of the other 9 had slipped his memory. A few days later, a woman with a 2-year old child, whose husband was earning \$17 a week, gave birth to triplets, and naturally had to appeal to the charitable. But a woman, of Boston, in 26 years gave birth to 22 children, all single births.

A Chicago butcher, whose wife presented him with triplets without his permission, was so incensed he "skipped town," and the family would have been in a deplorable state, had it not been for kind-hearted neighbors.

The death rate among the babies in large families is higher than customary. First of all the mother is often poorly fed, the stress of bearing children not so far apart leads to a run-down condition physically, and the developing baby is insufficiently nourished. Michels quotes some figures from Europe showing the death-rate in families of only one child is 23.5 per cent.; in those with eight children it rises to 51.5; and in families of fifteen and upward is 69.3.

W. Blair Bell, the English specialist remarks a woman among the well-to-do who should have had 17 children and lost 12 would be marked out as she went about the world for the compassion and wonder of her fellows; but such a destiny is accepted as possible by the working classes and is cruelly frequent among them.

Savage races find the struggle for existence is hard enough at best and that every extra mouth counts. Hence they resort to a crude plan of birth-control by killing children, generally females. In some places it is the custom to kill one or both of twins, especially as some tribes have the ridiculous belief that twin-births are a sign of adultery on the woman's part. An equally ridiculous belief was current a century or so ago in the north of France (Brittany), even at the present day the district is somewhat isolated, and was formerly much more so, owing to the few roads and these poor. As a consequence there was considerable intermarriage, but the men of one family had an unenviable reputation for being the fathers of twins, so much was this the case, that any woman not their wives who was unlucky enough to bear twins, was forthwith denounced as having been unfaithful to her marriage vows!

For a long time, now, France has taken the front rank in the matter of birth-control. The population of that country was practically stationary as far back as 1861-5. For the principal European countries the average number of children ranged from 5 per family in Hungary, to 3.1 in France. But Chesser points out that at present the tendency to limitation of the family is not confined to any country, or to any one class. It has extended through the great middle classes of Western Europe to the more thrifty and provident of the working classes; and in most instances the motive is not selfishness so much as a desire to conform to the standard of living in the same class.

Karl Pearson, the London statistician, estimates that one-half of the next generation is produced by one-quarter of the married population. Hence the small families of the so-called higher classes will be decidedly outnumbered in a few generations.

It seems that some plan of birth-control is not very far away. At the meeting in October, 1920, the New York State Federation of Women's Clubs adopted a resolution, by 147 against

97 votes, which declared that: "The primary necessity for family-and therefore for public-health, is an intelligently determined interval between pregnancies, to be secured by regulating the inception of life and not by interfering with life after it starts," and "urging the speedy removal of all barriers due to legal restrictions, tradition, prejudice, or ignorance which now prevent parents from access to scientific knowledge on this subject, as is possessed by the medical profession.

A few weeks later, in a meeting of the Peace Society of Milwaukee, the lady-president advocated a "bride's strike" and the refusal of married women to give birth to children until future wars are made impossible through disarmament. She declared that in this way pressure could be brought which would produce immediate results.

#### ARE BIRTH CONTROL METHODS INJURIOUS?\*

Advocates of scientific birth control are sometimes met with the absurd statement that such methods are injurious to the health of the woman. It is even asserted that they cause cancer and other disease and that they bring about sterility.

As applied to scientific birth control, these statements are both false and silly. In the light of the best authoritative information of the day, it can be unequivocally set down that modern birth control methods, properly employed, are not only not injurious but are often positively beneficial to the woman's health. The contrary is maintained for the most part by those who are mentally honest but uninformed or by such as are altogether prejudiced.

The clergy, bound to its theological dogmas is usually opposed to birth control methods and is only too ready to accept any bald statement levelled against them. A few physicians who are uninformed as to modern means of birth control, still incline to the opinion that they are injurious, but these physicians have in mind the earlier, cruder means of preventing conception.

Some of the persons who maintain that preventive measures are injurious are so ignorant of the whole subject that they in opposing abortion call it birth control. Still others believe that harmful drugs are given internally as contraceptives. They, of course, confuse abortives with the means of preventing concep-

---

\*By Margaret Sanger, in *Birth Control Review*, January, 1919.





MRS. MARGARET SANGER

It is in the deliberate restraint and measurement of human production that the fundamental problems of the family, the nation, the whole brotherhood of mankind find their solution. We all recognize the right of Margaret Sanger to speak on these matters with authority.—  
*Havelock Ellis.*



tion. Anyone who knows anything about either birth control or abortion knows that scientific birth control methods would do away with abortions which occur in appalling numbers in America every year.

One commonly practiced method of preventing conception is not only uncertain but beyond all doubt injurious to the woman's health. This is the one which, because of the withholding of scientific information upon the subject, is most commonly used. It was perhaps the earliest method known and was condemned by the wise men among the ancient Jews, being anathematized in the Bible in a very specific fashion. Modern science sometimes calls it Onanism from the name of the Biblical character who, we are told, was signally punished for practicing it.

Until recent years it was supposed that this method was injurious to the man alone, but it has been discovered that the man in many cases seems to suffer no ill effects, while the woman's health may actually be wrecked.

Mantegazza believes that organic disease of the spinal cord may follow this practice. Hirt says that it may lead to neurasthenic disorders. Eulenberg is of much the same opinion. Valenta declares that it is one of the chief causes of chronic metritis. Kleinwachter says that its harm to the system of the woman is by no means trivial. Still other great authorities who have pointed out the dangerous effects of the practice are Forel, Von Krafft-Ebing, Mensiga, Freud, Lowenfeld, Elischer and Ellis.

"The lack of sexual satisfaction," says Kisch, as a sort of final word upon the subject, "aggravates nervous and hysterical troubles in women, while suitably regulated intercourse with mutual satisfaction has an actively beneficial effect."

This method, then, in the opinion of the best informed of modern birth control advocates is unscientific, and dangerous. In the same class so far as being unscientific and injurious to the health is continence, much advocated but little practiced. This subject will be considered later as will the question whether scientific birth control methods are certain. For the present it is enough to point out that scientific birth control methods exclude those which are either uncertain or injurious and that the advocates of birth control stand for the dissemination of

knowledge which will permit mothers to limit their families in a sane, scientific, healthful way.

The first essential in Birth Control is cleanliness and a sane observance of the principles of sex hygiene. These factors alone, taught to a woman, ignorant of the proper care of her physical functions until she sought knowledge of Birth Control, have restored many to health and have even disposed of many cases of sterility. It is the consensus of modern medical opinion not only that scientific Birth Control methods are not harmful but in thousands of cases very beneficial to women suffering from leucorrhea, inflamed cervix and other local disturbances.

Among the objects of attacks by opponents of Birth Control are cleansing, antiseptic solutions, and the like. It is to be remembered that these are not preventives and are not to be depended upon as such. As the term indicates, an antiseptic is designed for and serves certain medical purposes. Its function when applied to the reproductive organs of a woman is medicinal or hygienic, not the prevention of conception. Injuries to women from the use of antiseptics result from ignorance or lack of proper directions, as would be the result if such solutions were improperly applied to a wound or a surgical incision.

Mechanical means have also been attacked, it being alleged that they cause cancer. Mechanical devices worn too constantly might produce irritation and cause trouble. A number of new devices have not yet been sufficiently tested to make an opinion as to their harmlessness possible at this time. And dangerous devices will be employed or devices misused as long as law and custom deny to woman knowledge of scientific means of determining the number of her children and the time of their birth.

A glance at statistics disposes of the contention that Birth Control is responsible for the development of cancer. The implication which the opponents of Birth Control seek to leave is that as the birth rate falls because of the use of contraceptives, the cancer rate rises. The contention is sheer nonsense. As far back as 1876 before the birth rate began to fall, the cancer rate began to rise. Moreover, it is only among women who have reached the age of 65 that the increase is noted. It seems probable that women above 65 have not used contraceptives, as they were not so widely known during the child bearing days



of women even now at that age. And if they had been known, it would seem very unlikely that a contraceptive used during their child-bearing period would cause cancer twenty years afterwards. Nor is this all—further light on this particular absurdity is that no increase in the rate of cancers affecting women's reproductive organs has been noted.

Statistics of several countries throw still more light upon the preposterousness of the contention. Ireland has had an increasing cancer rate for twenty years with a constant birth rate. Birth Control certainly is not responsible there. For five years of diminishing birth rate due to the application of scientific Birth Control, Holland has shown also a *decrease* in the cancer rate. France, where Birth Control methods are in wide use, has a cancer mortality of only .76 per thousand, as against .95 in England and Wales, where the birth rate was .28 per thousand at that time.

The assertion that Birth Control methods induce sterility is equally ridiculous. Many a woman, through the use of scientific contraceptives has so toned up and strengthened her reproductive organs as to become capable of child bearing when she would otherwise have continued barren. Where sterility has been laid to contraceptives, physicians have discovered in nearly every case conclusive proof of some condition in the woman or her husband which would have prevented children under any circumstances. In thousands of cases where women have practised scientific Birth Control for five, ten and even twenty years, they have later borne strong, healthy children. Usually the child is stronger in such cases because the mother has waited until her health is at its best and the family means are such as to give the baby the proper care, before and after its birth.

Dr. William J. Robinson's challenge, issued several years ago, still remains unanswered. "I challenge" said he, "any physician and gynecologist to bring forth a single authenticated case in which disease or injury resulted from modern methods of prevention."

The gist of the matter then is this: Scientific Birth Control is not only harmless but often a direct benefit to the health. Unscientific contraceptives are as likely to harm their users as any other unscientific thing applied to or used in connection with any part of the body. The plain conclusion is that with the

health of the womanhood of America at stake, the mediæval laws and customs which prevent full and free dissemination of information concerning scientific Birth Control should be sent to the scrap heap along with rack, the thumb screws and other outworn instruments of torture.

Besides being harmless and of positive benefit locally, scientific Birth Control methods have a much more important function for the improvement of the health of women. Anyone who knows anything at all about the subject knows that the health of a woman who is the mother of two or three children born several years apart is better than that of the mother of many children who follow each other at periods of a year or two.

Nor is this all. The dread of undesired pregnancy is the nightmare of the lives of millions of women. To this cause and this cause alone is directly traceable the wrecking of the physical systems of many of them. Wille, a prominent authority quoted by Kisch, asserts that "the continued fear of pregnancy will in most cases do more injury to the feminine system than all the preventive measures in the world."

No woman can be healthy or strong who lives continuously in fear. Moreover, it is a fact universally recognized by physicians that to a nervously weak woman, preventive measures are necessary and a number of them are even helpful in regaining her health.

The sooner these facts are understood, the sooner the laws against the spread of scientific Birth Control are abrogated and information concerning reliable and safe or beneficial contraceptives comes within the reach of all women, the quicker the question of the general health of women will be settled.

#### VOLUNTARY MOTHERHOOD\*

Our train was crossing the Nevada desert, and four passengers were conversing in a corner of the observation coach. Our group consisted of a successful physician from the Middle West, taking a brief vacation on the Pacific Coast; an earnest middle aged clergyman, giving up a New York pastorate to accept a larger one in California; a well known San Francisco lawyer returning home from Washington, where he had argued

---

\*By Rabbi Rudolph I. Coffee, Ph.D., in *Birth Control Review*, November, 1918.

a case before the Supreme Court, and myself. Our conversation had touched various angles of the great World War, and we were then discussing the child of tomorrow, as he would be affected by these war changes.

"He must be given more practical schooling," said the lawyer.

"More attention must be paid to his physical needs," added the doctor.

The minister, fearing that his radicalism might shock us, earnestly said, "I speak for the unborn child. He must be well born." To which I quickly added, "His birth should be a voluntary act and the deliberate wish of his parents."

At once, the three professions were arrayed against me. "Do you stand for birth control?" they spoke as with one voice, and I smiled in assent.

My clerical acquaintance questioned me first. "If you are a true minister of God, how dare you interfere with the laws of Nature?" I replied that a law of Nature which controlled the actions of dogs, pigs and cats might not arbitrarily be binding on man as well. Surely there must be some degree of difference.

"But, Rabbi," he continued as though clinching his argument, "does not the Bible say 'be fruitful and multiply and fill the earth'?" I replied that God's word never commanded us to fill the earth with idiots, imbeciles and blind babies, the inevitable outcome of accepting this verse of Genesis without question. A command which was given, if we literally accept Genesis as divine, when the world was in its infancy and needed population, requires some modification in these days of overcrowded tenements and filthy slums.

Strange indeed and very sad, how the Bible can be used to uphold dangerous doctrines. The Kaiser quotes the Bible to show that he is divinely appointed. People, utterly unacquainted with Bible criticism, cite verses from Daniel to prove the approaching end of the world. Had Columbus listened to the so-called wisemen, and their Bible interpretations, he would never have discovered America. The Bible is a holy book, but its interpreters have not always acted wisely. No friend of the Bible will quote its pages to prevent such action as will stop, at the source, this terrible increase of insanity and sex diseases.



The medical opposition to my position was along different lines. "If you think I shall perform abortions for the sake of your theory, you are much mistaken" the doctor said. Of course, I quickly assured him that voluntary motherhood also objects to abortive operations. We further believe that it would minimize the number of these illegal acts because we stand for education along sex lines by competent teachers.

The doctor rather hotly protested and said that medical men—not laymen and faddists—should lead a reform movement which will so radically change methods of living. I reminded him that house cleaning does not always come from within. Not the insurance men, but Charles E. Hughes, a lawyer, had led the way to insurance reforms; not the lawyers, but an outraged public opinion, was overcoming the antiquated legal procedure of a century ago; it is not the doctors of America, but the Army and the Navy that is wiping out the segregated districts. Ten years ago, five years ago, we were still told by medical men that prostitution was a "necessary evil." Now, if the doctors will not lead in this movement for voluntary motherhood, forward looking men and women will be compelled to take the lead in this struggle for higher living ideals.

The *lawyer* belonged to the old school. "Whatever is, is right." He had made a very comfortable living, let others do likewise. Because he had been born with a healthy constitution, he expected the same of others. I asked how many children he had and slowly he answered "*one*." His wife did not wish the burden of caring for a second. The *doctor* likewise was the father of but *one* child. His wife was physically unable to bear another without grave risk and danger. The *minister* added corroborative evidence of a very startling nature. His family, also was limited to but *one* child. Both he and his wife loved children, but his salary did not allow him to support a larger family.

*So these three opponents of voluntary motherhood were proving my argument through their own lives. But with this very important difference. The poor who should limit the size of their families, lack the necessary information. These three strong and cultured men, well able to care for their personal interests, would deny the knowledge of birth control to the very people who need it most.*

Having thus disarmed the three men, I explained the true meaning of voluntary motherhood to them. Let us frown on those women, physically, economically and mentally fit to be mothers who refuse this highest function of womanhood. They are the real upholders of race suicide, not those poor ignorant souls who seek guidance and light. From the homes of the healthy and the independent citizens, not from the weak, struggling and pauper families should the majority of our future babies come. Voluntary motherhood does not lay emphasis on fewer normal babies, but it does insist on fewer babies who are unfit to fight life's battles properly. Voluntary motherhood hopes for more babies, more of the fit, more of the healthy and strong, so that this world may be properly rebuilt for the residence of man.

#### BIRTH CONTROL OR ABORTION\*

Family limitation will be practiced. No law has yet been framed that can prevent it. The Church has been powerless and the champions of wornout moral creeds find themselves trying in vain to force all women to become mothers against their wills.

Abundant evidence of the futility of seeking to impose involuntary motherhood upon women is found in the size of the families of the rich, of the well-to-do and of the wage workers of large earning capacity. The women of these classes long ago refused to be mere brood animals—usually they prefer to be voluntary mothers, determining for themselves the number of children they shall have and when they shall have them. Family limitation for them is an accomplished fact.

It is also an accomplished fact with many of the wives of the less highly paid workers. But with the latter, as well as with some of their more fortunate sisters, family limitation takes a far more drastic and too often a terribly dangerous course. The awakened woman of today will not bear unwanted children. She will not bear more children than she can care for. And if she is denied the knowledge of the safe, harmless, scientific methods of birth control, she limits her family by means of abortion.

In the very nature of the case, it is impossible to get accurate figures upon the number of abortions performed annually

---

\*By Margaret Sanger, in *Birth Control Review*, December, 1918.



in the United States. It is often said, however, that one in five pregnancies end in abortion. One estimate is that 150,000 occur in the United States each year and that 25,000 women die of the effects of such operations in every twelve months. Dr. William J. Robinson asserts that there are 1,000,000 abortions every year in this country and adds that the estimate is conservative. He quotes Justice John Proctor Clark as saying that there are at least 100,000 in the same length of time in New York City alone.

Dr. Max Hirsch, a famous authority quotes an opinion that there are 2,000,000 abortions in the United States every year!

"I believe" declares Dr. Hirsch, "that I may say without exaggeration that absolutely spontaneous or unprovoked abortions are extremely rare, that a vast majority—I should estimate it at 80 per cent—have a criminal origin.

"Our examinations have informed us that the largest number of abortions are performed on married women. This fact brings us to the conclusion that contraceptive measures among the upper classes and the practice of abortion among the lower class, are the real means employed to regulate the number of offspring."

The question, then, is not whether family limitation should be practiced. It is being practiced; it has long been practiced and it will always be practiced. The question now is whether it is to be attained by normal, scientific birth control methods or by the abnormal, often dangerous, surgical operation.

That is the question which the church, the state, the moralist, and most of all, the woman herself, must face.

The knowledge of birth control methods may for a time be denied to the woman of the working class, but those who are responsible for denying it to her, and she herself, should understand clearly the dangers to which she is exposed by the dark age laws which force her into the hands of the abortionist. To understand the more clearly what these dangers are, and to realize the more fully how much better it would be to avoid them, it is first necessary that women should know something of the processes of conception, the prevention of which frees them of all risk of having to resort to abortion.

In every woman's ovaries there are imbedded millions of ovules or eggs. They are there in every female at birth and as



the girl grows into womanhood, these ovules or eggs develop also. At a certain period or age, the ripest ovule leaves the nest or ovary and comes on down one of the tubes into the womb and passes out of the body. When this takes place, it is said that the girl is at the age of puberty, for the ovule is now ready for fertilization (or conception) by the male sperm.

About the same time the ovule is ripening or developing, the womb is preparing to receive the fertilized ovum by a reinforced blood supply brought to its lining. To this lining the ovum will cling and gather its nourishment after fertilization takes place. If fertilization (conception) does not take place, the ovum passes on out of the body and the uterus throws off its surplus blood supply. This is called the menstrual period and occurs once a month or about every twenty-eight days.

In the male sexual organs, there are glands (testes) which secrete a fluid called the semen. In the semen is the life-giving principle, the sperm.

When intercourse takes place (if no preventive is used) the semen is deposited in the woman's vagina. The ovule is not in the vagina, but is in the womb, further up, in safety, or perhaps in the tube on its way to the womb. As steel is attracted to the magnet, the sperm of the male starts on its way to seek the ovum. Several of these sperm cells start, but only one enters the ovum and is absorbed into it. This process is called fertilization, conception or impregnation. If no children are desired, the meeting of the male sperm and the ovum must be prevented. When scientific means are used to prevent this meeting, and thereby to limit families, one is said to practice birth control.

But if preventive means are not used and the sperm meets the ovum and development thus begins, any attempt at removing it or stopping its further growth is called abortion.

There is no doubt that women are apt to look upon abortion as of little consequence and to treat it accordingly. An abortion is as important a matter as a confinement and requires as much attention as the birth of a child at its full term.

"The immediate dangers of abortion," says Dr. J. Clifton Edgar, in his book "The Practice of Obstetrics," "are hemorrhage, retention of an adherent placenta, sepsis, tetanus, per-

foration of the uterus. They also cause sterility, anemia, malignant diseases, displacements, neurosis, and endometritis."

In plain, everyday language, in an abortion there is always a very serious risk to the health and often to the life of the patient.

It is only the women of wealth who can afford to give an abortion proper care and treatment both at the time of the operation and afterwards. These women often escape any serious consequences from its occurrence.

The women whose incomes are limited and who must continue at work before they have recovered from the effects of an abortion are the great army of sufferers. It is among such that the deaths due to abortion usually ensue. It is these, too, who are most often forced to resort to such operations.

If death does not result, the woman who has undergone an abortion is not therefore safe. The womb may not return to its normal size but remain large and heavy, tending to fall away from its natural position. Abortion often leaves the uterus in a condition to conceive easily again and unless prevention is strictly followed another pregnancy will surely occur. Frequent abortions tend to cause barrenness and serious, painful pelvic ailments. These and other conditions arising from such operations are quite likely to ruin a woman's general health.

While there are cases where even the law recognizes an abortion as justifiable if recommended by a physician, I assert that the hundreds of thousands of abortions performed in America each year are a disgrace to civilization.

*I also assert that the responsibilities for these abortions and the illness, misery and deaths that come in their train lies at the door of a government whose authority has been stretched beyond the limits of the people's intention and which, in its puritanical blindness, insists upon suffering and death from ignorance, rather than life and happiness from knowledge and prevention.*

*It needs no assertion of mine to call attention to the grim fact that the laws prohibiting the imparting of information concerning the preventing of conception are responsible for tens of thousands of deaths each year in this country and an untold amount of sickness and sorrow. The suffering and the death of these women is squarely upon the heads of the lawmakers and*

*the puritanical, masculine-minded persons, who insist upon retaining the abominable legal restrictions.*

Try as they will they cannot escape the truth, nor hide it under the cloak of stupid hypocrisy. If the laws against imparting knowledge of scientific birth control were repealed, the 1,000,000 or 2,000,000 women who undergo abortions in the United States each year would escape the agony of the surgeon's instruments and the long trail of disease, suffering and death which so often follows.

"He who would combat abortion" says Dr. Hirsch, "and at the same time combat contraceptive measures may be likened to the person who would fight contagious diseases and forbid disinfection. For contraceptive measures are important weapons in the fight against abortion.

"America has a law since 1873 \* \* \* which prohibits by criminal statute, the distribution and regulation of contraceptive measures. It follows, therefore \* \* \* that America stands at the head of all nations in the huge number of abortions."

There is the case in a nutshell. Family limitation will always be practiced as it is now being practiced—either by birth control or by abortion. We know that. The one means health and happiness—a stronger, better race. The other means disease, suffering, death.

When all is said and done, it is not the advocate of birth control, but the bitter, unthinkable condition brought about by the blindness of church, state and society that puts up to all three the question:

*Birth Control or Abortion—which shall it be?*

#### ROBERT INGERSOLL ON BIRTH CONTROL\*

For thousands of years men and women have been trying to reform the world. They have created gods and devils, heavens and hells; they have written sacred books, performed miracles, built cathedrals and dungeons, they have crowned and uncrowned kings and queens; they have tortured and imprisoned, flayed alive and burned; they have preached and prayed; they have tried promises and threats; they have coaxed and persuaded; they have

---

\*A wonderful plea for birth control made by Robert G. Ingersoll in the course of an address delivered at the Hollis Theatre, Boston, on June 2, 1899. More than twenty years have elapsed since these words were spoken and each passing day has but added weight to the arguments so vividly expressed.



preached and taught, and in countless ways have endeavored to make people honest, temperate, industrious and virtuous; they have built hospitals and asylums, universities and schools, and seem to have done their very best to make mankind better and happier, and yet they have not succeeded.

Why have the reformers failed? I will tell them why.

Ignorance, poverty and vice are depopulating the world. The gutter is a nursery. People unable even to support themselves fill the tenements, the huts, the hovels with children. They depend on the Lord, on luck and charity. They are not intelligent enough to think about consequences or to feel responsibility. At the same time they do not want children, because a child is a curse to them and to itself. *The babe is not welcome because it is a burden. These unwelcome children fill the jails and prisons, the asylums and hospitals, and they crowd the scaffolds.* A few are rescued by chance or charity, but the great majority are failures. They become vicious, ferocious. They live by fraud and violence, and bequeath their vices to their children.

Against this inundation of vice, the forces of reform are helpless, and charity itself becomes an unconscious promoter of crime.

Failure seems to be the trade-mark of nature. Why? Nature has no design, no intelligence. Nature produces without purpose, sustains without intention, and destroys without thought. Man has a little intelligence, and he should use it. Intelligence is the only lever capable of raising mankind.

The real question is, can we prevent the ignorant, the poor, the vicious, from filling the world with their children?

Can we prevent this Missouri of ignorance and vice from emptying into the Mississippi of civilization?

Must the world forever remain the victim of ignorant passion? Can the world be civilized to such a degree that consequences will be taken into consideration by all?

Why should men and women have children that they cannot take care of, children that are burdens and curses? Why? Because they have more passion than intelligence, more passion than reason.

You cannot reform these people with tracts and talk. You cannot reform these people with preaching and creed. Passion is, and always has been, deaf.

These weapons of reform are substantially useless. Criminals, tramps, beggars and failures are increasing every day. The prisons, jails, poor houses and asylums are crowded. Religion is helpless. Law can punish, but it can neither reform criminals nor prevent crime. The tide of vice is rising. The war that is now being waged against the forces of evil is as hopeless as the battle of the fireflies against the darkness of night.

There is but one hope. Ignorance, poverty and vice must stop populating the world. This cannot be done by moral suasion. This cannot be done by talk or example. This cannot be done by religion or by law, by priest or hangman. This cannot be done by force, physical or moral. *To accomplish this there is but one way. Science must make woman the owner, the mistress of herself. Science, the only possible savior of mankind, must put it in the power of woman to decide for herself whether she will or will not become a mother.*

This is the solution of the whole question. This frees woman. The babes that are then born will be welcome. They will be clasped by glad hands to happy breasts. They will fill homes with light and joy.

Men and women who believe that slaves are purer, truer than the free, who believe that fear is a safer guide than knowledge, that only those are really good who obey the commands of others, and that ignorance is the soil in which the perfect, perfumed flower of virtue grows, will, with protesting hands, hide their shocked faces.

Men and women who think that light is the enemy of virtue, that purity dwells in darkness, that it is dangerous for human beings to know themselves and the facts in Nature that affect their well being, will be horrified at the thought of making intelligence the master of passion.

But I look forward to the time when men and women by reason of their knowledge of consequences, of the morality born of intelligence, will refuse to perpetuate disease and pain, will refuse to fill the world with failures.

When that time comes, the prison walls will fall, the dungeons will be flooded with light, and the shadow of the scaffold will cease to curse the earth. Poverty and crime will be childless. The withered hands of want will not be stretched for alms. They

will be dust. The whole world will be intelligent, virtuous and free.

WHICH IS THE BETTER WAY?\*

HOW TWO COUPLES SETTLE THE SIZE OF THEIR FAMILIES.

*The Circumstances:—*

Each couple have three children. They live very economically. The husband's small salary is used to the last cent. The cost of living is increasing daily and there is positively no chance to provide for another child except by depriving the present children of education and even of the bare necessities of life. Another child would mean a set-back which would involve accepting charity of the state.

*or*

The husband has contracted tuberculosis or some hereditarily communicable disease,

*or*

The health of the wife will not permit further childbirth.

*The Decision:—*

Both couples, knowing that their first duty is to the children they already have, to society, the country and to themselves, and realizing that more children would be a burden on the state, or would take the bread out of the mouths of their present family, decided not to have any more children.

*Couple No. 1*

*Sanctioned by the church and the "purist"*

Refrain from sexual relations for a long period, say for four years, in this way permitting the natural seed to pass away as in celibates, unfertilized.

*Thus controlling birth by negative methods.*

*Couple No. 2*

*Termed murder by the church and lust by the "purist"*

Live happily on as husband and wife, and use contraceptive methods for the same period, in this way preventing the fertilization of the seed.

*Thus controlling birth by positive methods.*

\*By Mary DeBrito, in *Birth Control Review*, February, 1919.



*The Results at the End of Four Years*

BOTH COUPLES HAVE USED THEIR OWN JUDGMENT AND VOLUNTARILY PREVENTED THE BIRTH OF TWO CHILDREN EACH.

*Object:* SAME IN BOTH CASES.

*Result:* SAME IN BOTH CASES.

Thus: since the intention and the accomplishment were exactly the same in both cases, the sole difference was the way in which the result was accomplished.

Therefore anyone who calls the achievement murder in one case must also agree that it is the same thing in the other case. BOTH COUPLES ACCOMPLISHED THE SAME END. THEY SUCCESSFULLY PREVENTED THE BIRTH OF MORE CHILDREN OF THEIR OWN ACCORD.

The matter of the ways and means of bringing about the result is purely a matter of taste. Any self styled "purist" who would limit cohabitation to the intentional reproduction of offspring, should just as consistently subscribe to the doctrine that since the purpose of eating is to maintain life, one should eat only what is sufficient to keep life in the body and that indulgence in dessert is sinful; or since clothes were primarily intended for covering and warmth, no one should wear lace for the pleasure of so doing.

Anyone who delights in the picture of a congenial couple, separated for years, looking at each other through the iron bars of celibacy (which only too frequently drives weak men into the arms of other women) has a most distorted view of this beautiful relation.

Possession of birth control information never leads to excess of indulgence by intelligent and refined people any more than the knowledge that he will not be spanked, necessarily leads any good child to immediately become incorrigible.

## VOLUNTARY PARENTHOOD LEAGUE

The director of this organization is Mrs. Mary Ware Dennett (51 East 59th St., New York City). The objects for which it was founded are as follows:

1. To render available for the people's need, the best scientific knowledge as to how parenthood may be voluntary instead of accidental; and as a first step toward that end, the removal of the words "preventing conception" from the Federal obscenity laws which now besmirch and degrade the question of intelligent parenthood by including it with penalized indecencies.

2. The education of parents so that the birth of children may occur with due regard to health, heredity, income, choice, environment and the well being of the community.

The League is concentrating on Object No. 1 till it shall be accomplished.

The so-called "Comstock" obscenity law was passed by Congress in 1873, and ever since then there has been more or less open agitation against it, and it has been secretly broken by increasing thousands of individuals, until it has become a dead letter for practically all who have learned how to make it so. But until now, no one has even gone through the motions of specifically asking Congress to remove from the Penal Code the words "preventing conception," which never had any proper connection with all the indecencies that the law was framed to suppress.

The Voluntary Parenthood League is like the "lady from Philadelphia" in the old story, who quite simply insisted that the horse be untied in order that the carriage might go. Merely protesting against the law is futile unless some steps are taken toward changing it. So we are taking those steps—firmly, steadily and persistently. We say, change the Federal law first, as it is the model for all the state laws. The states will then easily follow suit, just as they did when the Federal "Comstock" law was first passed.

Being an amendment to the Penal Code, the bill, according to precedent, would be referred to the Judiciary Committee of each House. But since it is primarily a health measure, the procedure recommended by Senator Nelson, Chairman of the Judiciary Committee, will be followed, namely, that it be referred first to the Committee on Public Health, and if approved by that Committee, the Judiciary Committee can then, as he said, "attend to the technicalities."

The most important members on whom pressure should be put are the members of the two Judiciary Committees and the

Committee on Public Health, and they should be addressed respectively at the Senate Office Building and the House Office Building, Washington, D. C.

The sections to be amended are given below in substance. Note that we are not only striking out "preventing conception," but we are adding two words which strengthen and define the prohibition of abortion. This is deemed wise because it is sometimes hastily assumed that preventing conception and abortion are synonymous, and nothing could be farther from the truth—abortion being interference with life *after* it has started, and contraception or prevenception being the prevention of the *start* of a new life. Abortion is sanctioned by legal precedent when a physician considers it imperative to save the mother's life, but otherwise it is illegal. The Federal law has never made this distinction, as have the state laws—hence our amendment.

*Matter in () to be omitted. Matter in italics to be added.*

Section 211, Federal Penal Code.—Every obscene, lewd, or lascivious, and every filthy book, pamphlet, picture, paper, letter, writing, print, or other publication of an indecent character, and every article or thing designed, adapted, or intended for (preventing conception of) producing or *facilitating illegal* abortion, or for any indecent or immoral use; and every article, instrument, substance, drug, medicine, or thing which is advertised or described in a manner calculated to lead another to use or apply it for (preventing conception or) producing *or facilitating illegal abortion*, or for any indecent or immoral purpose; and every written or printed card, letter, circular, book, pamphlet, advertisement or notice of any kind giving information directly or indirectly, where, or how, or of whom, or by what means any of the hereinbeforementioned matters, articles, or things may be obtained or made, or where or by whom any act or operation of any kind for procuring (or) producing *or facilitating* of *illegal* abortion will be done or performed, or how or by what means (conception may be prevented or) *illegal* abortion may be produced or *facilitated* whether sealed or unsealed, is hereby declared to be non-mailable matter and shall not be conveyed in the mails or delivered from any post office or by any letter carrier. Whoever shall knowingly deposit or cause to be deposited for mailing or delivery, anything declared by this section to be non-mailable, or shall knowingly take, or cause the same to be taken, from the mails for the purpose of circulating or disposing thereof, or of aiding in the circulation or disposition thereof, shall be fined not more than five thousand dollars, or imprisoned not more than five years, or both.

*Matter in () to be omitted. Matter in italics to be added.*

Section 245, Federal Penal Code.—Whoever shall bring or cause to be brought into the United States or any place subject to the jurisdiction thereof from any foreign country or shall therein knowingly deposit or cause to be deposited with any express company any obscene, lewd, or lascivious or any filthy book, pamphlet, picture, paper, letter, writing,



print, or other matter of indecent character, or any drug, medicine, article, or thing designed, adapted or intended for (preventing conception or) producing or *facilitating illegal abortion* or for any indecent or immoral use, shall be fined not more than five thousand dollars or imprisoned not more than five years or both.

A proposed new section for the Penal Code to be added to our bill if it seems advisable for the protection of the public.

"No printed information as to methods of preventing conception, and no ingredients compounded for the purpose of preventing conception shall be transportable through the mails or by any other public carrier in the United States except such as bear endorsement of duly licensed physicians or public health authorities."

Should anyone ask if the V. P. L. bill will not make it possible for irresponsible laymen, quacks or commercial interests to scatter this knowledge broadcast, hawk it on the street corners, etc., please make it clear we are confident that the leaders of the medical profession will meet this need and opportunity so effectually that ignorant laymen, or self interested money-makers, will have no chance to function. If the information is given out by all doctors in their private practice, by all clinics, hospitals and dispensaries, is discussed in medical journals, perfected by research in medical schools, and published by governmental health agencies, like the Children's Bureau, the Public Health Service, and State Boards of Health, there will be such wise and wide circulation of the knowledge from authoritative sources that no unworthy agencies will have any inducement to compete.

We feel that this confidence in the medical profession is justified, because hygiene is progressing as never before, preventive medicine is the great modern impulse in the profession, and then we have the precedent of the extraordinary work done during the War to control venereal disease. The doctors met the war exigency handsomely. They issued millions of pamphlets, and leaflets to educate not only the army and navy, but the whole civilian population. The profession can surely be counted on to meet this constructive opportunity with equal skill and devotion to the public welfare.

An officer of one of the largest child welfare organizations asked how much was needed to get our bills through Congress and the eighteen states where amendments will also be necessary. We said that \$50,000 would probably do it. "Is that all?" he ex-

claimed, "Why if you saved only twenty-five mothers and babies, it would be worth that much." Not that the value of mothers and babies can be estimated in cash, but our bill will save many, many thousands every single year. The budgets of large charitable and welfare organizations run from \$40,000 to \$1,000,000 a year. Our bill will help to decrease the need not only for these organizations, but will markedly lessen the present drain on public funds for the institutional care of the defective and unfit. How much saner and more constructive it will be when the money from the pockets of the rich and from the people's taxes can be released to a great extent from these endless patchings of preventable misery, and can be used instead for education and for the enrichment of millions of lives which are now hopelessly dull and gray.

Our legislation hits clear to the foundation of health and happiness. If you don't believe it, imagine yourself in the place of parents who can earn only small wages, whose babies have kept coming till the whole family is desperately short of food, clothes and a chance, and whose only medical service is what can be had from the hospitals and clinics, which never officially break the law and give contraceptive information as private physicians frequently do for their well-to-do patients. Think what such a situation would mean to *you*! And then help your very utmost.\*

---

\* Those wishing definite information as to how they may help should address The Voluntary Parenthood League, 51 East 59th Street, New York City.

## CHAPTER XI

### THE LIMITATION OF OFFSPRING BY THE PREVENTION OF CONCEPTION\*

#### PREVENTION OF CONCEPTION

**T**HIS subject directly or indirectly touches every man, woman and child—nay more, it touches not only the living child, it touches the child not yet born.

We believe that under any conditions and particularly under our present economic conditions, human beings should be able to decide how many children they want to have and when they want to have them. And to accomplish this result we demand that the knowledge of preventing undesirable conception, should *not* be considered criminal knowledge, that its dissemination should *not* be considered a criminal offense punishable by hard labor in Federal prisons, but that it should be considered knowledge useful and necessary to the welfare of the race and of the individual.

We would not force any family to limit the number of their children against their will, though we would endeavor to create a public opinion which would consider it a disgrace for any family to have more children than they can bring up and educate properly. Public opinion is stronger than any laws, and in time people would be as much ashamed of having children whom they could not bring up properly in every sense of the word, as they are now of having their children turn out criminals.

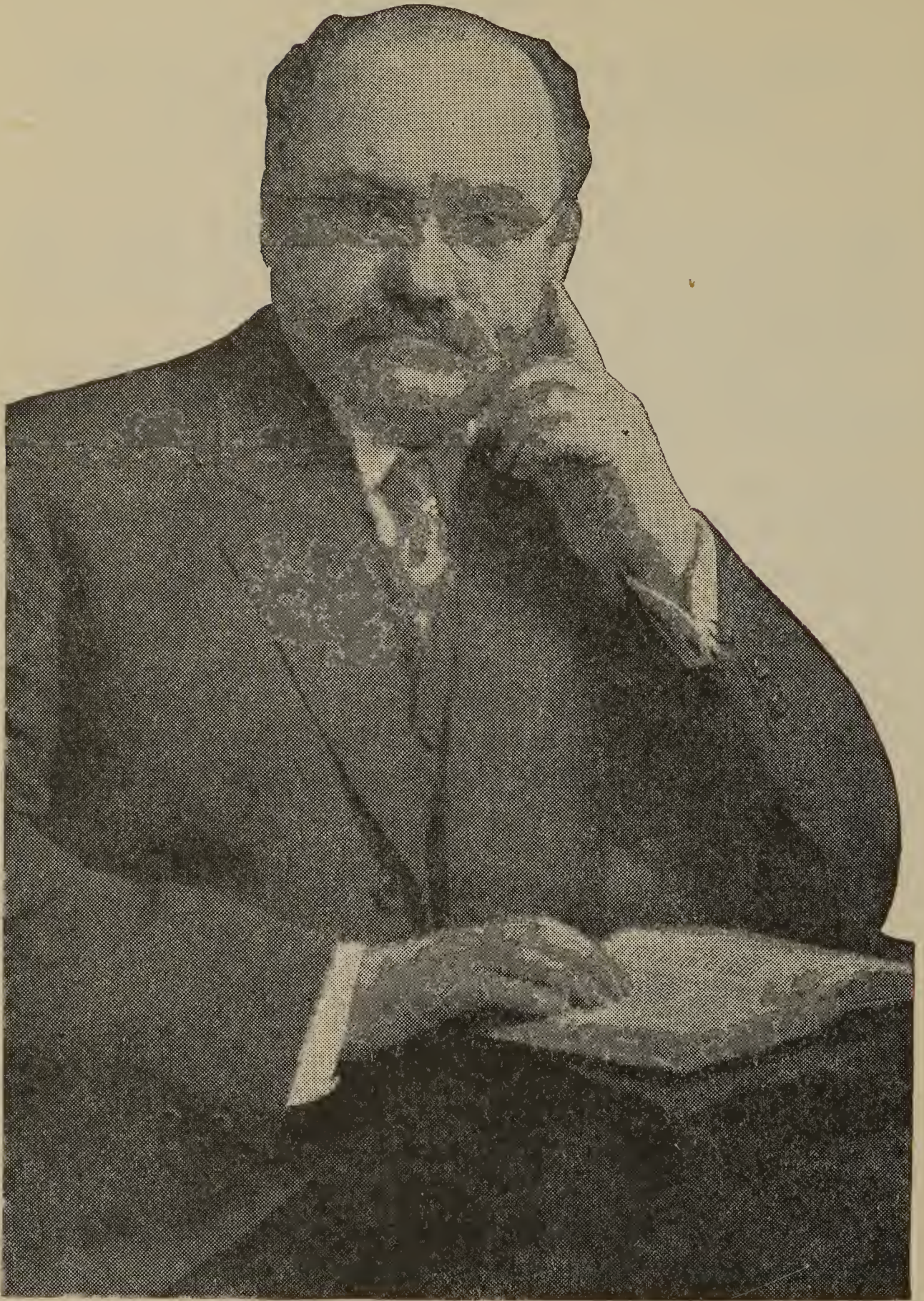
Now, no disgrace can attach to any poor family, no matter how many children they have, because society *prevents* them from having the knowledge of how to limit the number of children. But if that knowledge became easily accessible and people still refused to avail themselves of it, then they would properly be considered as criminal members of the community.

As far as couples are concerned who are well-to-do, who love children, and who are well capable of taking care of a large number, we American limitationists would say: "God bless you,

---

\*Extracts from *Birth Control* by Dr. Wm. J. Robinson, The Critic and Guide Co., New York City. (See Adv. Last Page.)





WILLIAM J. ROBINSON, M.D.

Pioneer of the Birth Control Movement in America and One of the  
World's Foremost Sexologists.



have as many children as you want to; there is plenty of room yet for all of you."

Our European friends would put a limit to the number of children even of the well-to-do. They claim that the means of subsistence are but limited, that Western Europe is about as thickly populated as it can be. And they are afraid that the birth of a large number of people, even among rich and well-to-do, means the taking out of the bread from the mouths of somebody, from the mouths of the poor. We are not afraid of it. We know that America can support in perfect comfort millions and millions more of people.

I, on the other hand, was drawn into the limitation of offspring propaganda by the misery resulting from too many children which I witnessed among my friends and acquaintances and, as stated before, among my patients in the early years of my practice. Not that I do not recognize that, eventually, in the future, the race will, in self-preservation, have to put a strong check upon its birth rate, but I am dealing, I always prefer to deal, with the living people of today.

#### THE SPECTER OF TOO MANY CHILDREN

The effects of the limitation of offspring might be discussed under two separate heads: the effects upon the individual family, and upon the race as a whole. But you cannot injure or benefit the individual without injuring or benefiting the race, and you cannot injure or benefit the race without injuring or benefiting the individual.

Under our economic conditions that the fear of too many children is a most frightful specter which terrorizes the ordinary workman and the middle class and professional man, is something which requires no discussion. There would not be this frenzied demand for contraceptive knowledge if this were not so. That an unlimited number of children is a curse to the poor, requires almost no argument. There is not a physician who has not had cases in his practice of families which started life in a respectable manner but which became quickly demoralized, financially and physically, by children coming in rapid succession. And many a physician will tell you of cases in which their endeavors to bring to life a still-born child were not at all considered by the parents, by the father particularly, with favor.

That a family of three or four can live better, more comfortably, on a certain sum per week, say \$25, than can a family of six or seven, goes without saying. But we will deal with this point later on.

A workingman should not have more than two children. Every child after the second, and particularly after the third, is individually and racially a calamity. It means that the mother's health is being exhausted, that she cannot attend as properly as she should to her first children, that the succeeding children are taking away a part of the indispensable food and clothing from the first children, that the first children will not be able to get the necessary bringing up and education that they otherwise would, that they will be sent to work earlier than they otherwise would, it means glutting the labor market with wage-slaves. In short, in my opinion, too many children in other than well-to-do families is a crime. It is a crime against every member of the individual family, a crime against the father, a crime against the mother, a crime against the first children, a crime against the succeeding children, and a crime against society.

#### THE ORTHODOX REMEDIES

This being so, what is the remedy? Two remedies are proposed by our reactionary philosophers and sociologists. One is that the poor should not marry until able to support a family, or should marry late in life. This advice is as stupid as it is vicious. If the poor, embracing in this term not only the workingmen but many professional men, writers, small business men, etc., were to wait until they could support a family properly, they would not be able to marry while alive. They would have to wait until they went to heaven, or until they were in their second incarnation. But if the advice to marry late were universally followed, it would prove an irreparable injury to the human race. It would mean an indescribable increase in prostitution, in sexual perversions, in sexual weakness, and in venereal disease. The fathers would come to their nuptial beds sapped of all vitality, debilitated, infected. And as late marriages among men mean necessarily also late marriages among women, the mothers would be neurotic or psychotic old maids, and what children such unions would give rise to can readily be imagined.

The second advice is that married people should abstain from



sexual relations. To give advice which we know is impossible of being followed is the acme of fatuity. But where married people were foolish enough to attempt to follow this advice the effects were pernicious. For married people to attempt to abstain for any length of time means to lay the foundation for irritability, weakness, nervousness, or even genuine neuroses, and a cooling or even destruction of the affections. It very often means driving the husband into the arms of prostitutes, with the possible risks of venereal disease.

But a remedy must be had. The chief thing that distinguishes the human being from other animals is his intellect. The human intellect has given us remedies which, while permitting men and women to marry at the proper age and to live a normal sexual life as Nature intended, still help them to control the number of their children.

The greatest obstacle we meet in our propaganda is the confusion, both on the part of physicians and of the laity, of prevention of conception with abortion. Just as the statute books speak of the two in the same sentence, meting out the same severe punishment for both, so the physician and the layman often speak as if the one were as objectionable or as criminal as the other, and as if believing in the one necessarily meant accepting the other. Not only do contraception and abortion not belong in the same category, but one of the principal reasons, one of the strongest motives that makes us advocate contraception so persistently is because we want to do away with the evil of abortion as far as we can.

Abortion is degrading and humiliating to the woman. It is always accompanied with some risk, if not to life at least to health and it is apt to lead to abuses. For this and various other reasons all true humanitarians are endeavoring to diminish the evil of abortion, which is constantly on the increase. And one of the most effective remedies is the universal knowledge of the proper means of prevention of conception.

In inducing abortion we destroy something already formed; we destroy a potential human being. In prevention, however, we merely prevent chemically or mechanically the spermatozoa from coming in contact with the ovum. There is no greater crime or sin in this than in refraining from sexual intercourse.

## THE RACE SUICIDE BUGBEAR

The first objection we are apt to hear, when we advocate that the knowledge of the use of preventives be easily accessible, is that such knowledge would have dire effects, it would decrease the population to such a degree that the human race would commit suicide. Are families who possess a knowledge of efficient and harmless preventives perfectly childless? Of course not. They regulate the time when they want to have children and their number, but very few indeed decide to remain barren altogether.

That there is a small percentage who are so devoid of the parental impulse that they would utilize the preventives so as never to have any children I will admit. But is it not better for the race that people who are so utterly devoid of that something that we call the parental instinct that they do not want to have any children at all, should not have any? Is a child conceived, born and brought up against the will of the parents a spectacle to be enthusiastic over? On the contrary.

When I see to what interminable trouble and expense some men and women go in order to have children; what tortures and risks, endangering her very life, a prospective mother will undergo to have a living child, I have no fear that the use of preventives will result in the dying out of the human race.

No, there is no danger of the parental instinct dying out. I even deny that this instinct is now weaker than it was fifty or a hundred years ago. True, our ancestors had a larger progeny than we have, but they could not help themselves. At that time means for the prevention of conception were practically unknown, and they knew of no method except abstinence, which was never very popular. And this brings us to the second reason. Our ancestors were generally more intemperate in sexual matters, the same as in food and drink, than we are. Their life was coarse, dull, monotonous, and this was their only pleasure, as it still is of the lowest strata of society. And third, our ancestors lacked the sense of responsibility. They might have loved their children as much as we do, but our love is a finer love, more intelligent, more sublime, more anxious for the future. In other words, the love of our ancestors for their children was more a selfish love, as is the love of the low and ignorant of the present

day. Our love is a noble, altruistic one, which forces us occasionally to deprive ourselves of the pleasure of children for the children's own sake. Again I say, there is no danger of parental instinct dying out.

But we have proofs unanswerable and undeniable. Here we have a whole country, Holland, in which the use of preventives is practically universal—and is the country dying out? On the contrary, it is increasing even somewhat more rapidly than before, because wherever the birth rate goes down the death rate goes down step by step or even to a still greater degree. This can be proven by statistics from almost every country in the world.

#### DECREASED BIRTH-RATE MEANS DECREASED INFANTILE DEATH RATE

This decrease of the death rate is very easy to understand, because the fewer children a mother has the better care she can take of those she does have. The economic condition with fewer children is better than of families with many children, speaking, of course, of the same strata of society. And the mother's health not being exhausted by too frequent child-bearing, nursing and bringing up of children, her health is better and she gives birth to healthier and more resistant children.

I admit that when the knowledge of the use of preventives becomes really universal the rate of increase of the race will become very much slower. But there is certainly a great difference between a slow increase and suicide.

Is an increase in numbers at all desirable? Is China with its more than 400 millions any happier than we, who can boast of only 105 millions? And does China from any and every point of view amount to as much as does the United States, which has only about one-fourth of its population? I prefer a commonwealth of 5 million people, all of them healthy and contented, all having work to do, all materially comfortable, all educated and cultured, to an empire or a republic of 100 millions, all cutting each other's throats, all in fear of starvation, with senseless luxury on one hand and shameful poverty on the other—I prefer, I say, the small to the larger commonwealth.

#### THE CAUSE FOR ALARM LIES ELSEWHERE

There is one point, however, that should give all true friends of humanity cause for alarm. In countries like England and the United States, the most marked diminution of the birth rate has



been among the aristocracy, among the cultured classes, while it has been but slightly diminished among the workmen and among the poor and very poor. It means that those most able to bring up children, are breeding less and less, while those least able to and least capable of bringing up children and giving them a decent education and a decent start in life, keep on breeding unrestrainedly. It means that, if no check be put to this state of affairs, eventually the race will begin to degenerate.

But what is the remedy? To exhort, beg or command the better classes to become more prolific is, as you all know, practically useless—so the only remedy we have is to instruct the lower classes to make use of the same means so that they may not overwhelm the better elements, pollute the race-stock and add to human misery.

#### IT WILL LEAD TO IMMORALITY

People who have gotten over the “race suicide” bugaboo are deeply afraid that if this knowledge became universal female unchastity would become universal. They are convinced that what keeps our girls and other husbandless women chaste is the fear of pregnancy and nothing else. In other words, they openly acknowledge that our entire adult womanhood is mentally unchaste and what keeps a large proportion of them from physical unchastity is not morality but the fear of consequences.

To this argument, which next to the race suicide argument, seems to be the most formidable, and to a good many the most unanswerable, leaving out the answer that virtue which needs continuous guarding is scarcely worth the sentinel, my answer is that the fear of pregnancy is not the chief deterrent. What keeps most of our unmarried women chaste is the general and religious education, the custom of the country, hereditary influence, and the general monogamous tendency of the female.

On a certain percentage of the female population all these factors exert no influence now, and the only result the knowledge we advocate would have is that illicit relations would be entered upon with less terror, perhaps, with less anxiety than they are now, but *far from increasing immorality it would diminish it*. The fear of pregnancy does act as a deterrent in a large number to coitus in the natural way, but instead of that it leads to numerous perversions of the sexual act, which are as a rule

extremely injurious to the health of both partners. There are thousands of women who are physically virgins, whose hymen is intact, but expert in various sexual perversions, and such women, are in my opinion much more unchaste than the woman who enters upon normal, though illicit sexual relations, with the man she loves.

And if some women are bound to have illicit relations, is it not better that they should know the use of a harmless preventive than that they should become pregnant, disgracing themselves and their families, or that they should subject themselves to the degradation and risks of an abortion, or failing this commit suicide? I may be wrong, but cannot help believing I am kinder and more humane than those cruel bigots who demand that any woman who has indulged in illicit relations should expiate her "crime" by death or by all the humiliation, ostracism and suffering which are now imposed upon the mother of an illegitimate child.

#### IT IS INJURIOUS

This objection we still meet quite frequently, not only from the laity, but from physicians who are supposed to know better. A whole catalogue of ills are given which are likely to result: congestion, inflammation, cancer, nervousness, etc. This statement is unqualifiedly false. Physicians who make such statements do it either because they are ignorant or because they know only of some methods that *are* injurious, or confuse prevention of conception with abortion, or they do so deliberately to mislead the people, to prevent them from engaging in what they call an immoral, ungodly and demoralizing practice.

I emphasize: There is absolutely nothing injurious in the proper modern methods of prevention. On the contrary, more than once has it been noticed that women who suffered with congestion, leucorrhea, catarrh of the cervix and vagina, were improved by the use of modern contraceptives. Of course there is no doubt that certain mechanical devices and poisonous solutions are in use which may in time produce injury. Because an alkaline soap is irritating are you going to condemn the use of all soap? It is absurd, and still this is the kind of argument the opponents of the limitation of offspring have recourse to. *And I challenge any physician to bring a single authenticated case in which disease or injury resulted from the modern methods of prevention.*

## IT PRODUCES STERILITY

We know that the proper methods of prevention have absolutely no effect whatever in causing sterility. As long as the woman uses the preventive she is safe, as soon as she gives up the use of the preventive she becomes impregnated. Sometimes a single omission of the use of the preventive measure causes impregnation, as many women have found out to their sorrow.

But the sterility bugaboo is firmly rooted. A couple came to me who wanted to have children. They had used preventives for three years and then, their circumstances having improved, they decided to have a child, but although they had discontinued preventives for over a year, no offspring had resulted. They were firmly convinced that the wife was sterile owing to the use of the contraceptives. As a matter of fact, repeated examinations showed that the husband was suffering from complete azoöspemia and never could have any children, with or without contraceptives. But it was plainly to be seen these patients were skeptical and clung to their belief that the lack of offspring was due to the means used in the past.

## IT IS NOT ABSOLUTELY SURE

This is true in the sense that there is not one single method that is suitable for everybody, but it is not true that a certain means will not prove absolutely efficient in a certain given case, or practically so.

And this uncertainty is due to the fact that the whole thing is done secretly, clandestinely, as if a crime were being committed. If the whole thing were free and legal, if the matter could be discussed freely in the journals, each one would have no difficulty in finding the means most appropriate to herself.

But even as it is now, the methods are infallible in 98 or 99 per cent. of cases, and while this may be no consolation to the hundredth case that happens to be caught, we do consider that both for the individual family and for the race as a whole it is even now a means of the most wonderful potency for good. One little instance: In Berlin the birth rate was, in 1876, 240 per annum per each thousand married women; in 1912 the birth rate had fallen to 90! Doesn't this show the great efficacy of contraceptive measures?



## WOULD LEAD TO EXCESS IN MARRIED LIFE

Here is again the same idea: that we abstain from moral crimes and physical sins only through fear of the consequences. I stamp this medieval idea as false. Some people will commit sins, crimes and bestialities in spite of consequences; others will lead a healthy, moral, rational life just for its own sake, because they have been brought up to be decent. And I am sure that when the study of sexual hygiene has become universal, when men know that excessive indulgence is injurious, they will abstain from it, the same as they abstain from excessive alcoholic indulgence or excessive eating. It is true, as Shaw says, that married life offers the maximum of temptation with the maximum of opportunity, but as the variety is lacking, things equalize themselves and the vast majority of married couples settle down after the first few months to a temperate existence, sexually speaking.

The times, when the husbands indulge most unrestrainedly because the fear of impregnation is absent, is during their wives' pregnancies; and as pregnancies will be fewer and farther between, there will be less indulgence. So that we have a right to claim, that far from increasing indulgence in marital relations, a knowledge of the means of prevention will act as a check, and excesses will give place to moderation.

## IT IS AGAINST RELIGION

I know of no place in the Bible where the prevention of conception or limitation of offspring is prohibited. I do not claim to be a great student of the Bible, but recently at St. Mark's Church this point was brought up and the minister said distinctly that he did not know, at least he could not think at the time of any place in either the Old or the New Testament which contained anything condemning the use of preventives.

But assuming that it did contain an explicit injunction against their use, I would simply ask those whose conduct is guided by the Bible to refrain from using those means, but not to attempt to force their morals and their conduct upon people who are guided by different standards of morality.

## IT IS IMMORAL

This argument all depends on what you call immoral. No inanimate thing, no act can be moral or immoral per se. It is the circumstances under which an act is performed, the uses to which a thing is put that make it moral or immoral. Immoral is something that is injurious to the community, to another individual, or to the person himself. As contraceptives are not injurious to the persons using them, they are certainly not injurious to one's neighbors, and far from being injurious to the community they are helpful to it by raising the hygienic, eugenic and economic standards. So wherein does the immorality consist? I am afraid that those who bring up the immorality argument have created a fetish which they would find great difficulty in maintaining on its pedestal if forced to present real arguments.

## IT LEADS TO DIVORCE

We are told that childlessness is one of the causes of divorce, and statistics seem to show there is more divorce among childless couples than among those who have children.

Those who bring this argument forget one very important point. Most cases of divorce in which childlessness is the causative factor are due not to the fact that the parents used preventive measures, but to the fact that one of the partners, either the husband or the wife, *was sterile*. In other words, the divorce is not caused by the desire of the parents *not* to have any children, but by the desire *to have* them, a desire which is frustrated by the *inability* of either one or both partners. In all cases of divorce of which I know in which the partners were childless, the divorce was demanded by one of the partners just because he or she was extremely anxious to have children, and they hoped that by remarrying their ardent desire would be realized. No, prevention of conception plays but an insignificant part in the increase of divorce.

Divorce in itself in many cases is an unmitigated blessing, freeing two people from a yoke that has become hateful to one or both; and *voluntary* childlessness plays a very small rôle in the divorce problem; it is involuntary childlessness or sterility that does play an important part, and for this the prevention of conception propaganda is certainly not responsible.

## CHILDREN SUPPORT PARENTS IN THEIR OLD AGE

Another argument is that children often prove a blessing and support to the parents when the latter get old. I do not deny that. Are not two or three sufficient? And while it is true that some children do prove a blessing and support to their parents, many others prove a burden as long as they live. And there are certainly many more parents who wear themselves out and become prematurely aged in the struggle for existence, a struggle which is the more intense the more children there are at home, than are afterwards supported by their children. And besides it is a pretty, pretty sad state of affairs that parents who have worked all their lives should in their old age be so poor as to need the support of their children.

THE MORAL STANDARD OF THOSE WHO MAKE USE OF OR ADVOCATE  
THE USE OF PREVENTIVES

Pamphlets and books have been written against those who make use of preventives and those who advocate the rational limitation of offspring. They have been called immoral, decadent, degenerate, egotists, low creatures devoid of responsibility.

I will admit among the upper classes, and a certain percentage of the middle classes, the decision to limit children or to avoid having any at all, flows from a desire on the part of the parents not to have their comfort or personal pleasures interfered with. But this accusation is distinctly untrue when applied to the vast majority of the middle, professional and working classes. Far from being due to a lack of responsibility, it is due to a heightened sense of responsibility. Thinking parents are so imbued with the sense of responsibility in bringing a human being into the world under our present social and economic conditions, that we must praise them for refusing to bring into being too large a number.

*Having answered the most important objections, I will now summarize briefly what benefits would accrue to humanity if the knowledge of prevention became universal, or at least universally accessible.*



## WOULD ENCOURAGE EARLY MARRIAGE

The reason many men marry now at such a late age is because they are afraid they would not be able to support a wife with many children. If the men knew that by safe means they could limit their children to the number they can afford to have and to a time most convenient, they would marry much earlier and more of them would marry; and this would necessarily have a great effect in diminishing bachelors and old maids. This would in its turn have a great effect in diminishing prostitution with its terrible venereal disease.

I am not so optimistic as to believe that early marriages and the knowledge of prevention of conception will do away altogether with prostitution. People who have studied the subject know that among the patrons of prostitutes married men—and happily married men, too—constitute quite a large contingent. Patronage of prostitutes or seeking after illicit relations emanates from a different source than a mere desire for sexual gratification. But none the less it cannot be denied that if early marriage became a common thing, and if the fear of impregnating one's wife were eliminated, the greatest part of the demand for prostitution would be cut off. And with the diminution of prostitution goes a corresponding diminution in venereal disease.

Early marriage would have other beneficial effects; it would diminish masturbation, and tend to diminish the evils of abstinence, neurasthenia and various other neuroses.

## WOULD DIMINISH VENEREAL DISEASE AMONG THE MARRIED

There is one point that I believe has never been brought out before, and that is the remarkably beneficent influence which the use of contraceptives has and will have on the diminution of venereal disease among married people. There are thousands and tens of thousands of men who have had gonorrhea some time in their lives and who because they have no discharge or shreds in the urine erroneously consider themselves cured. Some hasty or incompetent physician may even have told them that they are cured. Those people get married and sooner or later they infect their wives. The use of contraceptive measures entirely abolishes or reduces to a minimum the danger of infection. For it so

happens that most of the contraceptive measures are at the same time preventives against gonorrheal and syphilitic infection.

In my practice I often base my decision as to whether I will permit or not permit a man to marry upon the fact whether or not he is going to use contraceptive measures. If the man tells me that they want to have children at once I am much more strict than otherwise, for there are cases in which in spite of the most careful tests it is impossible to say with scientific definiteness whether a man is absolutely free or not. And if such a man says contraceptives are going to be used for the first year or so, I have no hesitation in giving him permission to marry. I simply tell him to come around in six months or a year for another examination. But where the couple objects to contraceptives, then I insist upon more treatment and more examinations until I can be morally certain.

#### EXHAUSTS THE WOMAN'S BODY

Every physician knows that too frequent childbirth, too frequent nursing, and the sleepless nights that are required in bringing up a child, exhaust the vitality of thousands of mothers, make them prematurely old or turn them into chronic invalids. The knowledge of prevention would do away with this evil.

We are often told by our opponents of their mothers and grandmothers who had 8 or 12 or 15 children and were nevertheless healthy and pretty pictures to look upon. But they are the exception. In the vast majority frequent pregnancies exhaust the vitality of the mother, lead to early decay, to Bright's disease, and shorten life.

In discussing this question man is "at his best" in showing his unlimited egotism. One would think that childbirth is such a trifling matter, as to be utterly devoid of any pains and risks. The poor man utterly forgets the nausea, vomiting, dropsy, the aggravation of all other diseases which the woman may happen to be suffering with. He forgets the horrible agony of childbirth (which in spite of "twilight sleep" we will still have with us for quite some time to come). He forgets the dangers of hemorrhage, of lacerations, infections, convulsions. He overlooks the troubles connected with nursing of the child, etc., etc.

Let us remind our dear masculine friends that in spite of tremendous progress, the whole process of childbirth is still

something which many women look at quite justly with some dread. Not only have the processes of gestation, labor, the puerperium and lactation quite some morbidity but they have a quite respectable or even sinister mortality. 'Though the joke is not a particularly brilliant one, still it will bear repetition; it is to the effect, that if Nature had made it so that the man should have the first child and the woman the second, and thus further in alternation, there would never be a third child. *If man had to go through what women do, if men were not only the begetters but also the bearers of children, the laws against the prevention of conception on our statute books would never have been put on, or if they had been put on they would have been very quickly taken off.*

#### KILLS THE WOMAN'S SPIRIT

Besides the deleterious effect that frequent childbearing has upon the woman, often making her prematurely aged and hastening her death, there is another point to be considered. It cripples or kills the spirit of many a woman.

Of course an uncongenial or unsympathetic husband may without any outside "aid" succeed in a very short time in completely crushing the best woman's spirit and aspirations. But in the vast majority it will be found the real cause is the children following closely upon each other. How can a woman who has 4 or 5 children within the first ten years of her married life ever think of following up her studies and living up to her ideals and aspirations?

This argument will not appeal to many men, who think that all a woman is for—to breed children, that once she has entered into the holy bonds of matrimony she must like those entering Dante's Inferno leave everything behind and devote herself exclusively to the business of being a mother. I believe a woman should be a human being besides being a mother, and if she is to get some enjoyment out of life, she must not be forced to be a breeding machine merely.

#### NEURASTHENIA FROM IMPROPER METHODS

On account of our vicious laws, which make the imparting of knowledge on the subject so difficult, many women use improper and injurious methods of prevention and thereby injure their health or risk their very lives.



Similarly there are numberless thousands of men who have become pitiable weaklings from injurious methods which they practice through ignorance of better and harmless methods. Universal knowledge of the proper means of contraception would save these men from a deplorable fate, would do away with an evil which is greatly on the increase.

#### LARGELY RESPONSIBLE FOR THE ABORTION EVIL

The evil of abortion kills thousands of unmarried and tens of thousands of married women. If it does not kill, it often infects, maims and weakens for life. To the honor of the profession, be it said, the physician called in to treat a girl or woman dying from a criminal abortion, very often at great risk to himself, protects the good name of the poor woman, and does not give on the death certificate the true cause of death. The knowledge of the prevention of conception would do away entirely with the evil of abortion, or would reduce it at least to a minimum. Every investigator has found that wherever means of prevention of conception are most difficult to obtain, there abortions are at their highest. Where preventives are easy to obtain, where their sale is permitted by law, there both abortion and illegitimacy are reduced to a minimum.

#### WOULD DIMINISH PROSTITUTION IN MARRIED LIFE

We know that a good many married men who patronize prostitution do so not on account of wickedness merely, but to a great extent they are driven to it by the fear of impregnating their wives. And what is more—many wives know it and actually encourage their husbands to visit prostitutes, such is their terror of another and another and another pregnancy.. What this means in increased risks of venereal disease needs no detailed discussion. A knowledge of the means of prevention would obviate this terrible evil.

#### THE ENORMOUS BENEFITS FROM THE EUGENIC STANDPOINT

We know perfectly well there are people whom it is a crime to permit to bring children into the world. About the unquestionably insane, imbeciles, morons, and perverts, we need not worry in this respect. Society will have to take care of them by sterilizing them or segregating them. But there are people who

can very well get married, provided they do not bring children into the world. Among such we may mention people suffering with tuberculosis, epilepsy, perhaps cancer and certain mental abnormalities. We have no right to deprive those people of any affection in their lives. And besides, it would be worse than useless to do so. If you make your requirements for a marriage certificate too rigid, those people will be sure to enter into illicit unions, and this means an enormous increase in prostitution and illegitimacy. But teach those people the proper means of prevention of conception and the problem is solved.

There are thousands of syphilitic men and women who are perfectly safe as far as their partner is concerned, but not safe enough to become parents. They cannot infect but they must not give birth to children for fear that the children may have the taint in them. The use of preventives saves the world from thousands of pitiable hereditary syphilitics.

Or is it better to permit tainted parents to bring syphilitic, epileptic and insane children into the world than to use preventives? One reverend gentleman said it was much better to have the streets full of syphilitic, maimed and defective children than to accept the doctrines of Dr. Robinson.

Then again there are thousands of women who suffer from diseases which are not hereditary, which become dangerous only when pregnancy occurs. Cases of advanced heart or kidney disease, of very narrow or deformed pelvis, of tendencies to eclampsia or puerperal convulsions. To impregnate them means to hasten their end or actually to drive them into the grave. The knowledge of the prevention of conception would obviate these potential murders.

#### A FEW EVERYDAY CASES \*

In my twenty years' work for the cause of rational birth control I have come in contact with thousands and thousands of cases which demonstrate in the most convincing manner possible tragic results of forced or undesired motherhood.

Some of them are positively heartbreaking. They make you sick at the stupidity of the human race, at the stupidity and brutality of the lawgivers. But I do not wish to appeal to your

---

\*By Dr. Wm. J. Robinson in *Sex Knowledge for Women*, The Critic and Guide Co., New York City. (See Adv. Last Page.)

emotions. I will therefore briefly relate a few everyday cases, which will demonstrate to you the beneficence of contraceptive knowledge and the tragedy and misery caused by the lack of such knowledge.

CASE 1. This class of case is so common that I almost feel like apologizing for referring to it. She, whom I will call by the forbearing name of Mrs. Smith, had been married a little over nine years, and had given birth to five children. She was an excellent mother, nursed them herself, took good care of them, and all the five were living and healthy. But in caring for them and for the household all alone, for they could not afford a servant or a nurse-girl, all her vitality had been sapped, all her originally superb energy had dwindled down to nothing; her nerves were worn to a frazzle and she became but a shadow of her former self. And the fear of another pregnancy became an obsession with her. She dreamed of it at night, and it poisoned her waking hours in the day. She felt that she simply could not go through another pregnancy, another childbirth, with its sleepless nights and its weary toilsome days. She asked her doctor who brought her children into the world to give her some preventive, but he laughed the matter off. "Just be careful," was all the advice she got from him. And when in spite of being careful, she, horror of horrors, became pregnant again, she gathered up courage, went to the same doctor, and asked him to perform an abortion on her. But he was a highly respectable physician, a Christian gentleman, and he became highly indignant at her impudence in coming to him and asking him to commit "murder." Her tears and pleadings were in vain. He remained adamant.

*Whether he would have remained as adamant if instead of Mrs. Smith, who could only pay twenty-five dollars for the abortion, the patient had been one of his society clientèle, who could pay two hundred and fifty dollars, is a question which I will not answer in the affirmative or negative. I will leave it open. I will merely remark that in the question of abortion in certain specific cases the moral indignation of some physicians is in inverse proportion to the size of the fee expected. A doctor who will become terribly insulted when a poor woman who can only pay ten or fifteen dollars asks to be relieved of the fruit of her womb, will usually discover that the woman who can afford*



to pay one hundred dollars is badly in need of a curettement. Oh, no. *He does not perform an abortion. He merely curets the uterus.*

But to come back to Mrs. Smith. She went away from the indignant adamant doctor. But she was determined not to give birth to another child. She confided her trouble to a neighbor, who sent her to a midwife. The midwife was neither very expert nor very clean. Mrs. Smith had to go to her two or three times. After bleeding for about ten days she developed blood poisoning, from which she died a few days later, at the early age of twenty-nine, leaving a disconsolate father, who in time to come will probably find consolation with another woman, and five motherless children, who will never find consolation. *One may find a substitute for a wife, but there is no substitute for a mother.*

And such tragedies are of daily occurrence. May the Lord have mercy on the souls of those who are responsible for them!

Before I proceed further I wish to say that it is the terrible prevalence of the abortion evil, with its concomitant evils of infection, ill health, chronic invalidism and death, that more than any other single factor urges us in our birth control propaganda. And those who want to forbid the dissemination of any information about the prevention of conception are playing directly into the hands of the professional abortionists. They could not act any more zealously if they were in league with the latter and were paid by them. And having mentioned the subject of abortion, I wish to utter a note of warning. *In our birth control propaganda, we must be very careful to keep the question of the prevention of conception and of abortion separate and apart.* The stupid law puts the two in the same paragraph, some ignorant laymen and equally ignorant physicians treat the two as if they were the same thing.

CASE 2. Mr. A and Miss B are in love with each other. But they cannot get married, for his salary is too small. They might risk getting married, if the specter of an indefinite number of children did not stretch out its restraining hand. She comes from a good family, she was brought up, if not in the lap of luxury, in the lap of comfort and coziness, and it is the ambition of every good American to furnish his wife at least as good a

home as her father gave her. Her father, by the way, died prematurely from overwork in trying to give all possible comforts and advantages to a bevy of six unmarried and marriageable daughters.

As I said, the fear of children kept them back. Each year the hope revived that in another year their union in matrimony would be consummated. But the years passed. Mr. A's hair became thin and grayish, Miss B began to look haggard and pinched—and still the marriage could not take place. Miss B was very religious and very proper, and would not do anything that was improper. A was not quite so proper; he paid occasional visits elsewhere, and as instruction in venereal prophylaxis was not included in his college course, he acquired a gonorrhea, which it took him about six months to get rid of. To shorten the story, A was thirty-nine and Miss B was thirty-five when the many times postponed marriage was consummated, but Cupid seemed to be busy elsewhere when the ceremony took place, and there is very little romance in their married life. The marriage has remained childless, as I told Mr. A it would be.

I consider this a ruined life—and all for the lack of a little knowledge.

If the anti-preventionists, those who are opposed to any information about the prevention of conception, were not so hopelessly stupid, they would see that from their own point of view it would be better if such information were legally obtainable. For it would be instrumental in causing more marriages which otherwise remain unconsummated, and by favoring early marriages, it would be instrumental in curtailing the demand for prostitution, in diminishing venereal disease. And as is well known, venereal disease is one of the great factors in race suicide.

CASE 3. A young woman was married to a man who besides being a brutal drunkard was subject to periodic fits of insanity. Every year or two he would be taken to the lunatic asylum for a few weeks or months, and then discharged. And every time on his discharge he would celebrate his liberty by impregnating his wife. She hated and loathed him, but could not protect herself against his "embraces." And she had to see herself giving birth to one abnormal child after another. She begged

her doctor to give her some means of prevention, but that boob claimed ignorance, and the illegality of the thing. The woman finally committed suicide, but not before she had given birth to six abnormal children, who will probably grow up drunkards, criminals or insane.

And because we object to such kind of breeding, we are accused of being enemies of the human race, of advocating race suicide, of violating the laws of God and man.

CASE 4. This observation concerns a couple both of whom had a very bad heredity. The blood of each was badly tainted. The doctor who had treated the husband cautioned them and told them that they had no right to have children. But here the tables were turned. The doctor wanted to give them the means for prevention, but the husband and wife, pious Roman Catholics, would not go against their religion and God (as if God wanted a world full of imbeciles), and refused to employ any precautions. They have had four children so far. One of them seems fairly normal, except that he is silly, in which respect he is merely like his parents; two are deaf and blind in one eye; the fourth is practically an idiot.

This case brings us face to face with another phase of the problem. What should we do when the parents, stupid and ignorant, refuse to stop breeding worthless material? Eugenic agitation, education, will bring about such a strong public opinion that none but idiots, who will be vasectomized or segregated, will dare to bring into the world children that are physically and mentally handicapped.

CASE 5. This couple had been married eight years, and had five children. And the wife said she could not stand it any more. Another child—No, she preferred death. They practiced coitus interruptus for a while, with mutual disgust, but when the wife was caught again, she said: "No more!" And she would not let her husband come near her. He could do what he pleased—she did not care. After a few months he began to go elsewhere—contracted syphilis, had to give up his position, the home was broken up, the wife went out to work, the children are scattered—in short, a home, which we are told is the foundation of our society, is broken up, and there is misery and wretchedness all around—and all for the lack of a little timely information.



CASE 6. Mr. A and Miss B, twenty-eight and twenty-five years old, respectively, have known one another for several years, and in spite of their occupation, which is supposed to make people blasé and cynical—he being a reporter and she a special story writer—are quite in love with each other. But their occupation and income are such that they cannot possibly afford to have and to bring up any children. They would love to get married, but the specter of a child—or rather of children—frightens them; and they remain single, to the great physical and mental injury of both. Accidentally they learn of appropriate means of regulating conception, get married and live happily—ever after, that is, until they find themselves in a position to have children and to bring them up properly.

In what way was society injured by this young couple acquiring contraceptive information?

CASE 7. Mr. C and Miss D are in love with each other. Unfortunately there is a strong hereditary taint of insanity on both sides. They are too high-minded to think of giving birth to children. They might be all right, but with insanity one does not take any chances. The thing is too terrible. They are condemned to a life of celibacy, which to them means a life of loneliness and misery. But like an angel from heaven comes to them the knowledge that one can live a love-life without any penalties attached to it. They get married and there is not a happier couple living.

In what way has society been injured by this couple obtaining the contraceptive knowledge?

CASE 8. Mr. and Mrs. E have been married five years. They have a child four years old which shows unmistakable symptoms of epilepsy. They are horrified and an investigation discloses the fact that on her side in the preceding generation there was a good deal of epilepsy. Of course, the next child may not be epileptic. But then again it may. No parents with any sense of responsibility would take such chances. They decide to give up conjugal relations. They keep it up for about thirteen or fourteen months; then one night an accident happens and very soon she finds herself pregnant. She declares she would rather die than to give birth to and have to take care of another epileptic child. She goes to a friendly physician who performs

an abortion on her and now the couple, not secure against future accidents, if they live together, decide to separate, and a tragedy is in sight. Fortunately they learn that conception can be prevented, and they continue to live together with benefit to themselves and harm to none.

In what way has society been injured by those people acquiring contraceptive information?

CASE 9. Mr. and Mrs. F have been married six years, and in these six years they have been blessed with four children. When he married he was getting twenty-two dollars a week, and that is exactly what he is getting now. In the meantime the cost of living has gone up twenty-five per cent, and there are four extra mouths to feed and four extra bodies to clothe. What difference this has made in that little household can better be imagined than stated. The little mother has aged sixteen years in those six years, and there is not a trace left of her girlishness and youthfulness. She loves her children, and does not want to get rid of them. She would not take a million dollars for one of them, but she would not give five cents for another. But this is just what terrifies them: the possibility of another. And that possibility makes her irritable, makes her repel her husband's slightest advances, makes her move his bed to another room. She even tells him to satisfy his sexual desires elsewhere—and at the same time she is in fear and trembling that he might follow her advice. In short, a nice young home is about to be disrupted. Fortunately he reads somewhere an article on the subject of voluntary limitation of offspring, he begins to investigate; his physician pleads ignorance, but he is persistent, the physician investigates and obtains the desired information, which he shares with the patient. Harmony is restored and a happy home is re-established.

Who was injured by the couple obtaining this information? And if nobody was injured, and everybody concerned was benefited, then why should the imparting of such information be considered a felony, punishable like the most atrocious of crimes?

CASE 10. Mr. and Mrs. G have been married fifteen years. They were the parents of seven children, a large enough number for any family. Those seven children were born during the first eleven years of their married life. During the past five years,

afraid of having any more, they first abstained and then adopted a method which every modern sexologist knows is injurious to the nervous system of both the man and the woman. The man became a wreck; first neurasthenic, then impotent, cranky and grouchy, unable to get along in the office, constantly squabbling with his wife, who became just as bad a wreck. Their economic condition plus too many small children prevented the parents' separation. They remained living together, but they lived like a cat and a dog tied in a bag. Each silently prayed to be rid of the other. But a conversation overheard at a Turkish baths establishment put him on the right trail, and one year later we find the couple reconciled, both in good health and living a peaceful and fairly harmonious life. And those who have benefited most by the change are the children. In what way was society injured? And still if the doctor who gave Mr. G the information should have been caught and convicted, he would have been sent to prison for a year or two or five. Would he have deserved it?

Here we have several plain, simple, unembellished cases which are typical of millions of similar cases and which prove conclusively that the law against imparting information about preventing conception is brutal, vicious, antisocial. Should not such a law be repealed, wiped off the statute books? Of course, it should!



## CHAPTER XII

### SEX FACTS FOR THE MALE

**O**LD JOHN WESLEY, the founder of Methodism, said: "Cleanliness is next to godliness," and cleanliness of the sex organs has a great influence in preventing irritation—with rubbing and scratching—and indirectly promoting morality. Nevertheless, the cleanliness should not be carried to excess and thus defeat its very object.

In babies the foreskin is long and baggy. A cheesy-like secretion may set up irritation, and the foreskin becomes fastened to the end of the penis, or else the folds of the foreskin itself grow together. Where no changes of this sort occur, after puberty the erection of the organ pulls the foreskin back. In old age, the condition of the foreskin returns to that of the child, as in so many other directions at this time of life. And once more there may be tightness. While circumcision is best for babies and can be done at a very early age, where the parents object the adhesions can be separated by the doctor passing a suitable instrument between the foreskin and the end of the male organ, without any cutting or bleeding.

**Circumcision**—or removal of the foreskin—might be done with advantage in every boy-baby. Long, long ago, when men lived in trees, a foreskin which would cover the end of the penis completely might be of advantage in protecting the sensitive extremity from being scratched or bruised by the bark or branches; but this protection is no longer needed, in fact, rather a hindrance.

Such removal was obligatory in ancient Egypt, and probably copied from there by the Hebrews. It was—and is—widespread in Africa; before Christ the Ethiopians resorted to it, and the Zulus and other tribes continue it. It was not a religious rite in the beginning, but merely adopted as a measure of cleanliness, doubly necessary on account of the hot climate. Accordingly we find it scattered here and there over the globe; in all Mohammedans, for example. Sometimes as in the mountains of British Columbia (Canada), where the

climate is far from being hot. Among some tribes, circumcision of the female was also carried out.

In addition to the cleanly aspect of the custom, there seems to be some lessening of the liability to contract syphilis, the hardened covering from exposure not being wounded so readily, hence not furnishing a break by which the germs of syphilis can gain entrance.

(Australia is a queer country—some of the four-footed animals lay eggs; the swans are black; the leaves on the trees project with the edges up and down, hence throw no shade. The black natives have a mutilation, which in their lingo is called the “mika.” This consists in cutting a slit on the under surface of the male organ which opens into the urinary canal, hence during sexual commerce, the seminal fluid escapes through this, and there is no possibility of the female becoming pregnant. It seems to be done on every man after he has become the father of a child to prevent undue increase of the population.)

**Sex Alarms.** *Herpes* (shingles) are small blisters usually grouped into a circle. These may occur on any part of the skin, so they are often found on that of the genital organs. In a few days they dry up, but like the same disease elsewhere on the skin, have a great tendency to come back, being due to a disturbance of the nerves. Competent medical advice should be had, as the little blisters may readily become infected with the germ which causes soft sores.

**Varicoccele.** The veins of the male scrotum (purse, bag) are not very well supported by the loose surroundings, and often become large, when they form a mass feeling like the famous “bunch of worms” under the skin, which quacks refer to so often in their advertising matter and letters. Ninety-seven out of every 100 cases occur on the left side on account of peculiarities of the veins there, and which need not detain us. Moreover, the vast majority (80 to 90 per cent) are met with in individuals before the age of 25 years. There is no danger to life, nor is there any likelihood of “lost manhood,” or any other horrible consequence, the enlarged and swollen veins disappear, as a rule, sooner or later. They are on the same plan as are the common every-day “piles” about the lower end of the bowels, and these while annoying and even

painful at times, do not kill anybody. No treatment is necessary in most cases, simply pay no attention to the affair. If the man is engaged where he has to stand at a lathe or press while at work, or stand anywhere, it might be well for a time to wear a suspensory bandage, which can be had at most drug stores. *Above all it must be remembered that these swollen veins do not cause wasting of the testicles.*

**Hydrocele** is an accumulation of clear fluid, or dropsy of the sac which surrounds the testicles. It comes on earlier than varicocele, somewhat over one-half all cases being met with between 5 and 20. It is rather common in hot climates, but in any locality is due to feeble muscles or a weak heart. The condition comes on without warning and progresses more or less rapidly. In some 1,500 patients, it was present on both sides in about one-third, and the balance of men were affected equally often on the right and left sides. The amount of fluid present is from 8 to 10 ounces; as a rule, less than a pint. Sometimes enormous accumulations are found, to six quarts or more forming a swelling  $1\frac{1}{2}$  by 2 feet or more. The remedy is simple, "tapping" with a syringe, to remove the fluid, then injection of iodine or other irritant to prevent further accumulation. It may be necessary if the fluid re-accumulates to cut down and remove the lining of the sac, which puts a stop to it, for nothing is left to make the fluid. If it is not convenient to see a doctor, much relief for the time being can be had by wearing a suspensory bandage, or supporting the mass by a handkerchief pinned to the under-clothing.

**Urethrorrhea.** During sexual excitement mucous fluid is poured out from Cowper's glands near the bladder, and from the many small pockets in the lining of the penis. The object is (as already seen under Anatomy) to change this lining to alkaline from the acid condition in which it was left after the last passage of urine. This alkalinity in turn is to preserve the spermatozoa, which, as has been pointed out, are quickly killed by an acid neighborhood. Suppose the sexual excitement is not gratified, that is to say not gratified by sexual intercourse, this clear fluid may make its appearance at the end of the penis. This is of no consequence; it is not semen, nor does it weaken the individual.



**Prostatorrhea.** This is another escape of fluid, but in this instance from the prostate gland, the large chestnut-shaped mass which surrounds the neck of the bladder. It likewise occurs during sexual excitement, and may be set up by past excesses, entailing weakness of the small muscles. No attention should be paid to it, in fact worrying about it may keep it up.

**Spermatorrhea.** Here the discharge—as the name implies—contains semen or “sperm.” Of course, the only way to distinguish this variety from the last two is by the microscope, but the unfortunate victim of a mucous discharge imagines he is losing his vital “fluid” and makes himself despondent and miserable. A great many eminent physicians deny there is any discharge of semen at other times than during intercourse, or occasionally during sleep.

**Venereal Warts.** This term is decidedly inappropriate, for they are often produced by lack of cleanliness, and are found occasionally even in young children. They sometimes grow to such a size inside the foreskin that the foreskin cannot be retracted, or what is called “phimosis” occurs. When of any size there is a profuse discharge of intolerable odor. That they are not necessarily due to venereal disease is shown by the fact they are often met with in individuals of the other sex, who are afflicted with severe cases of “the whites.” Simple cleanliness often causes them to disappear, if not a little powdered borax or a *very* little powdered alum generally dries them up.

**“Lost Manhood.”** First of all it must be reiterated that the size of the male organ is no criterion whatsoever of the sexual power, notwithstanding the popular belief to the contrary.

Corner, an English surgeon, takes occasion to observe that another popular error is that the sexual power is correlated with the intellectual—decline of one being accompanied by decay of the other. Every man has a certain amount of energy; if he uses up that energy in one direction, there will be little left to be used in others; on the other hand, a man of abounding energy is likely to show it in all directions. The manner in which this energy shows itself seems to be acquired from surroundings and education to a great extent.

The supply also appears to be largely an inherent or congenital characteristic. Therefore the sexual is a very unreliable index of the intellectual life; although one can safely say that he who is possessed of little or no energy will display little or none in everything which he undertakes. The amount of development of the testicles is a very minor factor. The mainspring of sexual, as of other energy, lies in the brain and spinal cord, and not in the sexual organs, these latter are merely the works by which the mainspring of energy in the brain makes the "sexual clock go." With all declines of nervous energy, such as in illness or nervous exhaustion, the sexual power must decline correspondingly.

It has been stated that performance of the sexual act requires the delicate working in common of many sets of impulses. In consequence of the delicacy of this complicated system, the working in common of the many impulses, it is easily thrown out of gear. Thus in all illnesses the sexual power is affected early, and is one of the last possessions to return during convalescence. It also becomes easy to understand why those whose minds become depressed, and who perhaps discover a varicocele, find real concern in their loss of sexual power. In the less intellectual and, therefore, the more animal, the sexual nerve centers in the spinal marrow have little or no control from the brain, and may show a sort of exaggerated action. To put it briefly, the health and condition of an individual is often reflected in his sexual life. It is in consequence of this that so many patients are troubled about the functions of their generative system. It is necessary to convince them that their sexual condition is not the real trouble which afflicts them. It is merely the outward and visible sign of their inward and hidden condition, which lowers the nervous system. As a consequence the medicine must be directed to the nervous, not the generative system.

## CHAPTER XIII

### ADVICE TO GIRLS APPROACHING THE THRESHOLD OF WOMANHOOD\*

WHEN a girl has passed the transition period of puberty and is entering upon young womanhood she exerts an irresistible attraction on the male sex. Whether she give the impression of a luscious red rose or of a delicate white lily, the charms of a beautiful, healthy, bright girl of seventeen or eighteen are undeniable and their appeal to the esthetic and sexual sense of every normal male is a normal, *natural phenomenon*. Whether it is a good thing or a bad thing that it is so, we will not stop to discuss here. But it is a natural phenomenon, a natural law, if you will, and one does not quarrel with natural phenomena. It is useless. But the attraction which the girl exercises on the male is fraught with danger to her, and therefore a few words of advice and of warning are not out of place.

Fortunate are you, my young girl friend, if you come from a well-sheltered home, if you have been properly brought up, if you have a good and wise mother who knows how to take care of you. A mother's wise counsel given at the proper time, and her comradeship all the time, are more invulnerable than an armor of bronze and more secure than locked doors and barred windows. But if you have lost your mother at an early age, or if your mother is not of the right sort—it is no use hiding the fact that some mothers are not what they should be—if you have to shift for yourself, if you have to work in a shop, in an office, and particularly if you live alone and not with your parents, then temptations in the shape of men, young and old, will encounter you at every step; they will swarm about you like flies about a lump of sugar; they will stick to you like bees to a bunch of honeysuckle.

I do not want you to get the false idea that all men or most men are bad and mean, and are constantly on the lookout to ruin young girls. No! Most men are good and honorable and too conscientious to ruin a young life. But there are some men,

---

\*Dr. William J. Robinson in "Woman: Her Sex and Love Life," Critic and Guide Company, New York City. (See Adv. last page.)



young and old, who are devoid of any conscience, who are so egotistic that their personal pleasure is their only guide of conduct. They will pester you. Some will lyingly claim that they are in love with you; some perhaps will sincerely believe that they are in love with you, mistaking a temporary passion for the sacred feeling of love. Some will even promise to marry you—some making the promise in sincerity, others with the deliberate intent to deceive. Still others will try to convince you that chastity is an old superstition, and that there is nothing wrong in sexual relations. In short, all ways and means will be employed by those men to induce you to enter into sexual relations with them.

*Don't you do it!*

I am not preaching or sermonizing to you. I am not appealing to your religion or your morals. For if you have strong religious or moral ideas against illicit sexual relations, you are not in need of mine or anybody else's advice. But I assume that you are a more or less modern girl, with little or no religious bringing-up, or perhaps a radical girl, who has shaken off the shackles of religion and tradition. And to you I say: *Don't you do it.* Why? Because your welfare, your future happiness, is at stake. I am speaking from the point of view of your own good, and from that point of view I say: Resist all attempts which men make exclusively for the purpose of satisfying their sexual desire, their lust.

You will ask again, why? For several reasons. First, you run the risk of venereal infection. The danger is not so great now as in former times, but is great enough. There are still plenty of men dishonest enough to indulge in sexual relations with a woman when they know they are not radically cured. The same man who will not get married unless he is sure he is perfectly cured will not hesitate to subject a transient girl or woman to the risk of venereal infection. I know personally, because I have treated them; yes, I treated several intelligent and radical young men who infected young girls. And some of these girls in their turn, through *ignorance and innocence*, infected other men. So then, the first danger is the danger of venereal infection.

The second danger, still greater and more certain than the first, is the danger of impregnation. And pregnancy for a girl under our present moral and social-economic conditions is a terri-

ble calamity. She is ostracized everywhere, and it means, if discovered, her social death. But you will say: "Aren't there any remedies that can be used to prevent conception? Aren't you yourself among the world's chief birth-controllers; one of the world's chief advocates of the use of contraceptives? Yes! my dear young lady, but I never made the claim that the contraceptives were *absolutely* infallible, I never claimed that they were *100 per cent* effective in *100 per cent* of *all* cases. But if they are effective 999 times or even 990 times in every 1,000 they are a blessing. And thousands of families so considered them. And if a married woman "*gets caught*" once in awhile, the misfortune is not so great. But if the accident happens to a non-married woman, the misfortune *is* great. Then again, you want to bear in mind that accidents are less likely to happen to married than to non-married women. The married woman has no fear, needs no secrecy, and she can go about the method of preparation carefully, with deliberation. The unmarried girl, *as a rule*, has not the proper conveniences, more or less secrecy must be maintained, hurry is not infrequently necessary, and that is why accidents are more apt to occur in spite of the use of contraceptives. So then, the second danger, even more sinister than the first, is the danger of pregnancy. "But if a misfortune happens, can I not have an abortion produced?" No, not always. Physicians willing to induce an abortion are not found on every corner. But this is not the principal point. What I have to say on the subject I will say later on in this chapter.

Then it is well for you to bear in mind that those very men who use their utmost efforts, who strain every fibre and every nerve to get you, will despise you and detest you as soon as they have succeeded in making you yield to their wishes. This is one of the worst blots on the male character, a blot from which the female character is entirely free. And some men—fortunately their number is not very large—are such moral skunks that they take morbid pleasure in boasting publicly of their sexual conquests, and unscrupulously peddle about the name of the girl whom, by cunning false promises or other means, they succeeded in seducing. And, of course, such a girl finds it difficult or impossible to get married, and must end her days in solitude, without the hope of a home of her own.

For the above reasons I advise you earnestly and sincerely



not to yield to the solicitations of thoughtless or unscrupulous men, who think of nothing but their coarse sensual pleasures. It is advice dictated by common sense, by your own deeper interests, aside from any religious or moral considerations.

The above advice, or call it sermon if you will, is meant principally for young girls, girls between the ages of eighteen and twenty-five. If a girl has reached the age of twenty-eight or thirty and is willing to enter upon illicit sexual relations with her eyes open, with a full knowledge of the possible consequences, then it is her affair.

But whatever the relations between the man and the girl may be, whether she yielded in a fit of passion, or was seduced by false promises, by "moral" suasion, by hypnotic influence or by the vulgar method of being made drunk, what is she to do if she finds herself, to her horror, in a pregnant condition? There are two ways open to her; either let the pregnancy go to term or to have an abortion brought on.

If she lets the pregnancy go to term she has the alternative of bringing up the child herself openly or of placing it secretly in a foundling asylum. In the first case, the necessity of publicly acknowledging illegitimate motherhood requires so much moral courage that not one woman in a thousand is equal to it. It is not moral courage alone that is required; the social ostracism could be borne with stoicism and even with equanimity, if with it were not frequently associated the fear or the real danger of starvation. For under our present system the illegitimate mother finds many avenues of activity closed to her. A school teacher would lose her position instantly, and so would a woman in any public position. It is feared that her example might have a contaminating influence on the children or on her fellow workers. Nor could she be a social worker—I know of more than one woman who lost her position with social or philanthropic institutions as soon as it was discovered that she did not live up strictly to the conventional code of sex morality. Nor could she be a private governess.

It is thus seen that to acknowledge one's self an illegitimate mother requires so much courage, so much sacrifice, that very, very few mothers are now found who are equal to the task. Especially so when it is taken into consideration that the humiliations and indignities to which the child is subjected and the later



reproaches of the child itself make the mother's life a veritable hell. So this alternative is generally out of the question.

To give the child to a foundling asylum or to a "baby farm" means generally to condemn it to a slow death—and not such a slow one, either. For as statistics show, about 90 to 95 per cent of all babies in those institutions die within a few months. And the very few who survive and grow up have not a happy life. Life is hard enough for anybody; for children who come into the world handicapped by the disgrace of illegitimacy, life is torture indeed. It is with a breaking heart generally and because there is no other way out of the dilemma that a mother puts her baby away in a foundling asylum. She hopes and prays for its speedy death.

Taking into consideration the pitifully unhappy lot of the illegitimate child, it is no wonder that every unmarried woman, as soon as she finds herself pregnant, is frantically determined to get rid of the child in the womb as soon as possible. And abortion thrives in every civilized country. Thousands and thousands of doctors and semi-doctors and midwives are making a rich living in this country from practicing abortion. The greater the disgrace with which illegitimacy is considered in a country, the stricter the prohibition against the use of measures for the prevention of conception, the greater the number of abortions in that country. But abortion is not a trifle, to be undertaken with a light heart. It is true that if performed by a thoroughly competent physician, with all aseptic precautions, it is practically free from danger. But when performed by a careless physician or an ignorant midwife, trouble is apt to happen. Blood poisoning may set in, and the patient may be very sick for a time, and may on recovery from the acute illness remain a chronic invalid for life. And occasionally the patient dies. Whether or not abortion is justifiable under special circumstances is a separate question.

I do not wish to leave this topic without re-emphasizing the fact that abortion is not a trifle, to be undertaken or even to be spoken of lightly. Too many women, not only in the radical ranks, but in the conservative ranks as well, are in the habit of considering abortion as a joke, a trifling annoyance, something like a cold in the head, which, while disagreeable, is sure to pass away in a day or two. They know Mrs. A and Mrs. B and per-

haps Miss C who had abortions produced on them and in two or three days they were as good as ever. Yes! But they do not know Miss D who is resting in her grave, nor do they know why Miss E and Mrs. F are invalids for life. The women who get over their abortion experiences easily are apt to talk of their good luck; the women who have become chronic invalids or who are resting in their graves as a result of an abortion are not apt to talk of the matter.

And therefore, once more, remember, an abortion is no trifling matter.

One other piece of advice and I am through: Some men of a low moral and mental caliber are under the influence of the pernicious idea that if a girl has lost her virginity—no matter under what circumstances—she no longer amounts to much and is free prey for everybody who may want her. And, like beasts of prey, these wretched specimens of humanity pester such a girl with much more impudence, more brazenness than they dare to employ in the case of a girl who is still considered a virgin. And, what is more, the girls themselves become poisoned with this pernicious idea and dare not offer the same resistance that the virgin does. And they often yield with resignation, though against their will, and though they may experience a feeling of disgust against the man.

Now again, *don't you do it*. Do not nurse the medieval idea that because you are not a virgin in the physical sense, you are "ruined," "no good," and an outcast. You are nothing of the kind. If through some cause or other you are no longer in possession of an intact hymen, it is your affair or misfortune, and nobody else's. Do not on that account cast your eyes down and avoid meeting people. Carry your head high, do not fear to meet people, and treat with contempt the jeers of the stupid and ignorant. A person's entire character does not depend upon the presence or absence of the hymen, and one misstep should not ruin a person's whole life. A boy is not "ruined," is not an outcast, because he has had sexual relations before marriage, and while the boy's and girl's cases are not exactly identical, still the poor girl should not be made to expiate one error all her life long.

It isn't fair.

## CHAPTER XIV

### SEX FACTS FOR THE MARRIED

#### THE BEST TIME FOR MARRIAGE

THE exact date should be set by the prospective bride or her mother. The "resting stage" which is further considered under Menstruation, and may be looked on as about 10 or 12 days after the monthly flow stops, is the best period for the probability of immediate pregnancy is less at this time.

#### THE WEDDING NIGHT

Among the ancient Greeks a respite of three days was granted the bride before the marriage was consummated; in the Aztecs (Mexico) this was even extended to four days. No doubt in many instances such a custom might be revived with advantage. For—as Michels observes—many girls before marriage are left in crass ignorance regarding everything which concerns the sexual life—an ignorance which is responsible for an irresistible feeling of anxiety, and is not inconsistent with a dread expectation of terrible things about to happen. This is all the more comprehensible when we remember that the girl, while deliberately kept in ignorance, has nevertheless been able to glean from conversations, from books, and from overheard jests, a certain number of sexual facts, apt to be offensively conceived, precisely because they are torn from their natural context and are most remote from the normal working of the healthy girl's imagination. There is further to be considered the dread of the physical pain to be experienced from the rupture of the hymen. But the chief source of trouble is the suddenness of the sexual transition. Where the self-surrender is gradual, no anxiety arises. Anxiety and its sister-feeling of shame disappear in the ecstacy of love, take to flight before the awakening of desire.

The brutalities of the nuptial night often prove the grave of love. The sudden intimacy with a man who, materially at any rate and often psychologically as well, has been known only from a distance, strikes terror into many women, so that it is precisely the most chaste and the most delicate-minded who are



impelled to an erotic refusal; while as a result of this, men who are themselves of delicate fibre, and therefore also impressionable, actually become, in relation to such women, impotent. The bridal night and those that immediately follow it not infrequently conceal the germs of death. The marriage bed with its troubles and sufferings is often the starting-point of long illness, leading the man to a premature grave, and the woman to the lunatic asylum.

The current morality of the state of betrothal poisons that state and desecrates the act of sexual union of two loving beings, inasmuch as it permits the maiden's entry into the sexual life only under exposure to the fierce light of public curiosity—not to speak of the wedding journey and other abominations. She enters upon her married life decked out like a peacock, and profoundly wounded in her maiden sense of self-respect, because she knows beforehand the precise place and hour in which willy-nilly, she is to lose her virginity. The publicity thus given to an act, undoubtedly one of the most solemn in life, but which ought also to be one of the most private, proves very clearly that the moral code regulating betrothal and the introduction to marriage is still in an extremely primitive condition, and needs reform from its very foundation.

Instead of handing the young woman over to her husband on the bridal night, as one takes a mouse out of a trap to throw it to the cat (quoting Michels once more), the lovers should come together as true friends and real comrades, who sexually differentiated, only become aware of their sex by gradual stages, and gradually learn to make use of it.

On the other hand, Horch narrates a case where the bride boxed her husband's ears on the wedding night because he did not gratify her as often as she felt entitled to. (In "Sexual Truths," by W. J. Robinson, New York, 1919.)

#### COITUS NOT FOR PROCREATION

It is a question whether propagation of the species is the only purpose of the sexual instinct. If so it would seem the instinct should subside in the female after the change of life has been passed, and there is no possibility of any more children, yet we often find it continues for years unabated.

The phrenologists recognized this long ago by distinguishing

between the "bump" of amateness, presiding over sensual desire they claimed, and the bump of philoprogenitiveness, presiding over desire for children.

Even the Rev. H. Northcote admits this in his "Christianity and Sex Problems." He sets forth his view as follows: "Certainly, if the sexual act in humanity were a reproductive act and nothing more, the organs with which it is performed would belong more truly to the species than to the individual; but it has other objects than the sole one of reproduction. It is a love act. Duly regulated, it conduces to the ethical welfare of the individual and promotes his efficiency as a social unit."

So too, Exner (of the Y. M. C. A.) in his little book published under the auspices of the Association, believes sex pleasure in the animal world serves to assure propagation of the species. In human life it also serves the purposes of love and therefore it becomes legitimate for its own sake, aside from the purposes of procreation.

"Therefore the perpetuity of the race seems to depend on the exercise of this power. But the exercise of this power is used legitimately not alone for the reproduction of the race, but for the exchange and interchange of loving endearments between those who by the rights of marriage have been made man and wife" (Evangelist M. B. Williams in "Sex Problems").

#### FREQUENCY OF COITUS

It is utterly out of the question to lay down any hard-and-fast rule as to how often sexual congress in the married is advisable or even permissible. The best that can be done is to reach the happy medium, if this be possible. Zoroaster, that ancient Persian sage, who lived in the 7th century B. C., put the average at once every 9 days. About three hundred years after him, Plato the Greek philosopher, practically had the same idea of moderation—once every 10 days. And about ten centuries still later, Mohammed, an ardent advocate of plurality of wives, recommended twice a week.

Martin Luther, having been a monk—given the loose morals of monasteries in his day—was probably familiar with this phase of the question, and decided on two or three times a week. This average is still considered by some authorities as normal for individuals in good health and of sound bodies.

In support of this opinion, we choose the following passage from Tannenbaum:

One of the best established results of modern research is the fact that the sexuality of different individuals varies. Just as persons vary as to the quantity of food, sleep, drink or rest that their constitutions require, so do they vary as to the quantity of sexual indulgence requisite. Some are content with coitus once a week or once a fortnight; others require it daily or even several times daily. S. A. Tannenbaum (in "Sexual Truths," by W. J. Robinson, New York, 1919).

Zenobia, the celebrated queen of ancient Palmyra, permitted intercourse with her royal person once a month, unless pregnancy had occurred in the meantime. All this self-denial availed her but little, for it will be remembered she was brought to Rome in chains—though to be sure of gold—and died there far from her native land.

#### EXCESS

There is probably some tendency to excess in nearly every newly-married pair, though this soon lessens as the novelty wears off.

It is well established that sexual excess is better borne by the female. Insanity in males as a result of overindulgence is not rare, but is very uncommon in females. Nervous prostration as well is uncommon in the latter, and frequent in men.

Where from sleeping in the same bed, there is any proclivity to excess, in spite of all good resolutions—if separate sleeping-rooms cannot be had, the twin-beds fashionable of late years will be found of great service.

#### COITUS DURING MENSTRUATION

Just before or just after the flow, the sexual impulse is generally increased; it may also be heightened during the flow itself, but, as a rule, is less at this time.

Sexual congress is generally refrained from during the period. In former times it was deemed unlucky, and later on sinful, but at the present day principally from esthetic reasons. Nevertheless, it is occasionally advised by physicians, when all other means for inducing pregnancy have failed, and the woman remains barren. Again the act may be easier than usual, as the genital passages are loosened up somewhat during the period.



Gartman points out that menstruation increases the sex feeling in all females, not humans alone but among all females where its equivalent exists. During two days prior and during menstruation, the female sex instinct increases in strength (Leo M. Gartman in "Sexual Truths," by William J. Robinson, New York, 1919).

#### COITUS DURING PREGNANCY

Gartman also observes that during pregnancy the sex instinct of the sexually weak woman lessens or disappears; in the sexually strong one it persists during the whole nine months. It may only be due to the freedom people permit themselves during pregnancy. Measures were taken to prevent conception, and both husband and wife were half starved. It is when pregnancy is an established fact that measures are no longer taken to prevent conception. This feeling of safety causes all taboos to disappear and the pair forget the days of their starvation.

There is danger of producing miscarriage by the shock of the male organ against the neck of the womb, as well as by the greatly increased flow of blood to the sexual organs during the act. There is danger also, of blood-poisoning, especially in women who have had children, and in whom the neck of the womb is more open. Many cases "of childbed fever" due to this cause are to be found in medical journals, and many of these again, were fatal. In December, 1919, an Ohio doctor attended a woman, aged 43, with her 5th child, she came very near dying from peritonitis. It turned out the woman had had intercourse the night before coming to the hospital, and the physician attributed her misfortunes to this cause.

The danger from infection is at its height say in the last 3 months, there is considerable risk from other causes in the first 3, and the intercourse should be limited to the middle 3 months.

#### DYSPAREUNIA

This condition which means "painful intercourse" must be distinguished from vaginismus, in which painful cramps occur before intromission of the male organ.

There may be many causes—a narrow vagina (or what amounts to the same thing, disproportion between the male and female organs). Scratches and cuts about the external orifice of

the birth canal, from the first few days of married life. The womb itself or the ovary may be out of place and pressed on during the sexual act. There may be tumors or inflammations of the womb and its connections. Occasionally, no cause whatever can be discovered.

Of course, there is more or less pain attending the first few sexual acts after marriage, especially as the husband may be rough or awkward. This pain disappears—other things being equal—if a sufficient interval be allowed to elapse, and give the lacerations time to heal. If the condition is due to tumors or displacements, naturally medical advice is to be sought.

(A queer state of affairs is met with, though not very often. Here instead of pain, there may be disagreeable phenomena, headache, dizziness, nausea and vomiting or diarrhea.)

#### VAGINISMUS

It is now just 60 years since a Scotch author first described this painful and annoying cramp of various muscles of the female genitalia.

The first case reported in this country was that of a patient of 45, married at the age of 20, and an invalid since then. The reporter goes on to say: "I attempted to make a vaginal examination, but failed completely, the slightest touch at the mouth of the vagina producing the most intense suffering. Her nervous system was thrown into great commotion; there was a general muscular agitation; her whole frame was shivering as if with the rigors of an intermittent ["chills and fever"]. She shrieked aloud, her eyes glaring widely, while tears rolled down her cheeks, and she presented the most pitiable appearance of terror and agony. Notwithstanding all these outward involuntary evidences of physical suffering, she had the moral fortitude to hold herself on the couch, and implored me not to desist from my efforts if there was the least hope of finding out anything about the inexplicable condition. After pressing with all my strength for some minutes, I succeeded in introducing the index finger into the vagina up to the second joint, but no further. The resistance to its passage was so great, and the vaginal contraction so firm, as to deaden the sensation of the finger, and thus the examination revealed only an insuperable spasm of the sphincter vaginæ [the muscle surrounding the outer opening of the birth-canal].

The woman was then put to sleep: "As soon as she was fully under the influence of ether, greatly to my surprise I found the mouth of the vagina completely relaxed, and the vagina itself perfectly normal, not presenting the least variation from health."

The spasm affects not only the muscles of the genitalia, but in extreme cases those of the thighs, and even of the back; or—rarely—the entire body. During sexual excitement and intercourse, there is some contraction of the muscular apparatus of the female sexual organs, and vaginismus is merely an exaggeration of such contraction. It is a remarkable fact that on some occasions the spasm does not appear till after a child has been born, and it has even started up during the course of the birth thus impeding delivery.

A cure is generally to be expected with appropriate treatment, but takes considerable time. First and most important, all attempts at intercourse must be prohibited. The cause is often found to be some local condition, such for example, as an unusually tough hymen (maidenhead), or tears may have been produced on the wedding night and small ulcers are left which remain, and are prevented from healing by the repeated acts of sexual commerce.

It frequently happens that the spasm persists though the local ulcer (or whatever it was), has been cured. Under such circumstances physicians prescribe a solution of ointment of cocaine, which renders the parts less sensitive. However, it often becomes necessary for the doctor to dilate the birth canal gradually by instruments at regular intervals for some months.

#### FRIGIDITY (SEXUAL ANESTHESIA)

This is an extremely frequent cause of matrimonial unhappiness, often ending in the divorce court. Estimates by various authors range from 10 to 50, and even 75 per cent. Some claim it is increasing. It is generally considered to be less common among Jewish women. Nevertheless, it is evident this cannot be the only cause for divorce. We recall several instances to the contrary, one case in particular where the husband was separated for drunkenness, and marrying again, confessed the first union was much more satisfactory in respect of less frigidity.

Frigidity may be due to disease of the brain or the spinal cord; or it may be caused by diabetes and other disturbances of



the general health, by abuse of alcohol, and by addiction to morphine. Masturbation is thought by several authors to be an important cause, especially because the portions of the genitalia which are not the seat of excitation in intercourse are titillated and irritated. Hence the ordinary coitus has no effect on such parts, and fails to afford gratification.

Probably a cause, the frequency of which is utterly unsuspected is adhesions of the clitoris to its foreskin or to the neighboring parts. This little organ is not the only seat of voluptuous sensation in the female, but is probably the principal one. In fact, a Chicago specialist now deceased, wrote that it is a veritable electric push-button "which being pressed or irritated, rings up the whole nervous system."

Under normal conditions the clitoris is swollen during intercourse like a miniature penis, and is drawn out at right angles so its most sensitive part, the tip, comes in contact with the penis and is rubbed back and forth. When it is held in place by being adherent, it is prevented from coming in contact with the male organ.

Another Chicago specialist believes the fault is on part of the husband in many cases. If the sexual excitement is not brought to its natural climax, the reaction leaves the woman in a very disagreeable condition, and repeated occurrences of this kind may even lead to general nervous disturbances. Some of these unfortunate women learn to suppress their sexual sensation so as to avoid all these disagreeable sequelæ. Such a state of affairs is not only unfortunate, because it deprives the female partner of her natural rights, but it is also to be deplored because it practically brings down such a married woman to the level of the prostitute.

Michels, as usual, makes some very sensible remarks on this subject :

"The beloved woman can make use of certain safeguards for the control of the polygamous inclinations of the male. She possesses means which, though not infallible, are yet powerful, for holding in check the dangerous centrifugal tendencies of her husband, by providing for him at such times that sexual variety without which the erotic life of the male remains inadequate and incomplete. The means to which I refer are that the woman herself, within the limits of monogamic life, should become as

'polygamous' as possible; in other words, that she should offer a man the possibility of appeasing his polygamous instincts within the limits of a strictly monogamic union. Let me amplify this: No one but a dullard will vaunt himself on the possession of a frigid wife; none but a dullard will fail to understand that the frigid wife is not always a frigid woman, and that frigidity, far from being a safeguard against infidelity, may on the contrary merely be its precursor.\*

The sexual embrace effected simply as a one-sided act and purely as an affair of routine must in the long run prove repulsive to a man of refined sensibilities. A woman who is devoid of a certain measure of animality, and that by no means a small measure, must be regarded as a degenerate. Many women believe that they can play their part properly in married life with nothing more than indifference, complaisance, and passivity. Many even imagine that in this way they will make their husbands realize the magnificent purity and majesty of the love of the "respectable woman," in contrast with previous experiences of the shameless pleasures of intercourse with prostitutes. But a woman should know how to link a man to her, not only by the intensity, but also by the variety of her sexual manifestations. There is an apt Venetian proverb to the following effect: A woman must have four aspects; in the streets she must be self-contained, in church modest, in the house diligent, and in bed frenzied. The last postulate is based upon her recognition that uniformity is the grave of love.

Other things being equal, lack of gratification on the wife's part means lack of orgasm, and this in turn is supposed to mean lessened liability to pregnancy. Though Adler asserts:

The most important of all the psychic causes of lack of orgasm is the fear of pregnancy. *Consciously or unconsciously that fear dominates all the sexual thoughts of woman.* Most women harbor the idea that their own orgasm when it coincides with the man's ejaculation must result in pregnancy. This theory has been scientifically exploded; there are cases known in which

---

\* Jeanne Landre, in "*Echalote and Her Lovers*," writes very well: "How touching is the confidence by which all men are afflicted, and how touching is their blindness! An ardent temperament, even if it burns for them alone, infatuates them; the opposite phase, a coldness capable of refrigerating the rays of the sun, tranquillizes them. They never suspect that what is annulled by their presence, may be exalted by the presence of another. Such is their vanity that this idea never occurs to them, and the problem altogether exceeds their grasp. The woman who does not love them cannot possibly love anyone else!"

pregnancy was provoked during unconsciousness from ether, or from mechanical [artificial] introduction of the sperm. Pregnancy following rape or occurring during the first few days after marriage when the woman experienced only pain and discomfort, proves such a theory is untenable.

And yet there is a particle of truth in it. The proportion of pregnancies preceded by "feelings," however, is only a trifle higher than that of pregnancy preceded by no "feelings." (Otto Adler, in "Sexual Truths," by W. J. Robinson, New York, 1919.)

A corroborative case is reported in a well-known text-book on Obstetrics, a woman married for 6 years was childless. Finally, the orgasm occurred during copulation, and pregnancy followed.

The prospects for relief are none too bright. If adhesions of the clitoris are found, and these loosened up, cure often follows. In other instances, success has sometimes been had by measures directed toward the mental attitude, hypnotism or "mind cure."

Of course, sexual anesthesia may occur in men also, though it is much rarer. The famous English philosopher, Sir Isaac Newton, who lived to the age of 85, is said never to have had an erection. It may be his lifelong devotion to studies requiring the most intense mental application diverted his sexual life into other channels. So, too, it has been asserted that the marital infelicities of Thomas Carlyle and his wife were due to a physical deformity of the penis which rendered intercourse impossible, though not interfering in the least with the sexual appetite.

(In this connection it is interesting to recall that Sir Isaac Newton, was a premature child, and so small that "he could have been put into a quart mug." Nowadays many prematurely-born children are saved by incubators, but his survival is very creditable when we think of the crude methods possible in 1642.)

#### ONANISM

*Withdrawal; Defrauding; Incomplete Copulation; Interrupted Copulation*

The first mention of this is in the Old Testament (Genesis, XXXVIII, 9, 10):

And Onan knew that the seed should not be his; and it came to pass,



when he went in to his brother's wife, that he spilled it on the ground, lest that he should give seed to his brother.

And the thing which he did displeased the Lord; wherefore He slew him also.

It is not clear whether Onan was the originator or not (probably not), but if his violent end deterred any of his countrymen from following his example, his punishment has long since been forgotten, and onanism is probably as common among the married nowadays as masturbation is among the unmarried.

*Onanism is not masturbation*, evidently, though often used by authors as though synonymous. The male organ being completely withdrawn from the birth-canal before the seed is discharged, utterly prevents pregnancy from that sexual congress. Nevertheless, since the practice is unnatural, we should expect theoretically that it will be followed by serious consequences, and this is generally the case.

Much more serious results are experienced by the woman: During the copulative act the womb and connecting organs are full of blood, and as the orgasm does not occur, the blood stagnates. As a consequence, we frequently find chronic inflammation of the womb, sometimes displacement of that organ. But the nervous phenomena are especially significant, dull pain low down in the back and lower abdomen, with a sensation of dragging in the lower limbs, all these may keep up for several hours.

A few authors even assert that tumors of the womb are more common in women who resort to the method.

On the other hand, since there is little prospect of pregnancy, sexual excesses are very likely to be indulged in, and the evil effect added to that of the accompanying onanism.

#### COITUS RESERVATUS

In this form the sexual congress is kept up for an unusually long time, an hour or more, the man refraining from ejaculation, though his partner may have several orgasms. Therefore, for the woman this mode of copulation affords the utmost satisfaction, though for the man the necessary will-power and self-control are difficult to acquire and in many individuals utterly impossible. This is shown by the experience of the notorious Oneida Community in New York state, where this practice was called "pan-tagamy" or "male continence." In that strange association every

man was regarded as the husband of every woman from a theoretic standpoint. Nevertheless, in order for the males to become proficient in the method, they were (so the story goes) initiated soon after puberty by females past the childbearing age, so if the male were unable to refrain from emission of semen, no pregnancy could occur. For females, initiation by a male also considerably older, began several years after adolescence. The Oneida Community kept up this practice for several decades, and stopped it not because of any evil-effects, but from the criticism of the surrounding populace. (The Indians nearby formed a strange contrast. They used to get \$5.00 from the State for every child born on the reservation, and bred at a rate which would put white mice or guinea pigs to the blush.)

#### INJURIES DURING COITUS

The first act of sexual intercourse is generally accompanied by more or less bleeding from rupture of the hymen (maiden-head). Sometimes this is so profuse and continuous that medical aid has to be summoned. In such instances, however, there has usually been injury to some other structure in the vicinity, for instance, the birth canal itself. Fortunately the tears in the hymen heal up in a few days.

Awkward or intemperate sexual acts may produce serious injuries, tearing of the small lips (nymphæ or labia minora), or of the perineum between the sexual opening and that of the bowels. It seems amazing, but examples are often reported where intercourse has taken place not through the birth canal (vagina), but through the urinary passage (urethra) or the lower bowel.

Lastly attention may be called to the disgusting belief held in Europe, and when occurring here, in emigrants from Europe, that a stubborn case of gonorrhea can be cured by having intercourse with a virgin. This monstrous theory is responsible for many rapes on children.

## CHAPTER XV

### SEX IMMORALITY\*

#### An Argument in Defense of the Single Standard of Sexual Morals

THERE is much speculation if not much discussion, upon the prevalent double standard of sexual morals and the effects of continence upon continent individuals.

What is sexual continence? The general interpretation applied to this term is that it means abstinence from coitus, especially in an individual capable of performing such an act. This I think is an utterly wrong interpretation. Physiologically and socially, sexual continence means abstinence from those stimuli, received thru all the senses and engendered in the mind, which result in libidinous turgescence of the organs of copulation.

There is an unscientific tendency to take out of the sexual functions the act of copulation and treat it as an isolated entity. As a matter of fact, it is but one link in a chain of sexual phenomena. This understanding is important because many persons are misled by the conventional definition, and often do themselves physical harm. A young man and woman who repeatedly indulge themselves in amorous caresses to the point of creating a high degree of sexual excitement, and then part without coitus, may regard themselves as continent, but in the light of physiology and pathology they are neither continent nor wise. The continence which they have respected is a fetish. The greater should not be confused with the lesser. The man who drinks brandy and soda, with the idea of going as far as he can, is not slaking his thirst, he is getting drunk. Sexual continence is not compatible with sexual excitement.

This whole question of sexual love has been confused by breaking it up into sections. The great and fundamental sexual joys, inherent in communion with an object of love, by thought, word, look, or touch, stimulating with rapture the higher centers, and infusing the mind with gratification, are all a part of the

---

\* By Dr. James P. Warbasse in *Sex Morality*, Critic and Guide Co., New York City. (See Adv., last page.)



sexual chain, altho no libidinous impulses arise. Very easily from one state may the stimulations pass on to the next, the next, and the next, until the great sexual act is complete, and a babe lies nestled at its mother's breast. To start the chain of impulses means that the end is already in sight. To interrupt the process of sexual love is fraught with a sense of incompleteness, with dissatisfaction, and often with danger. Continence is abstinence from sexual love and its great stimuli.

The next definition which we should attempt is that of "single standard" and "double standard." By the first, it is understood that certain sexual practices which are morally justifiable for one sex are morally justifiable for the other sex. In the terms of our western civilization, it is the male sex which is understood to be permitted the privileges which are denied the female. In some of the older civilizations the female enjoyed the greater privileges. It is my own opinion that there should be no privileged sex or class. The sexual morality which governs the woman should be the same as that which governs the man. Privilege in sex, society, or industry, is pernicious. There is no such thing as one class having privileges or advantages unless there is another class of whom advantage is taken. True democracy is sex-wide as well as class-wide.

From a scientific point of view this belief is made tenable because, I think, the harm of an incomplete sexual life is visited upon both the man and the woman—equally, let us say, tho the peculiarities of the two sexes make comparison impossible. Much is said of the *libido sexualis* developing earlier and being stronger in the male, but we have no conclusive information. We do only know that the male is more subjected to artificial stimulation; but if a boy and a girl grew up alone in an atmosphere free from such influences, it is conceivable that their impulses would be similar. The same may be said of the sexual impulses of men; they are unduly stimulated by the artificial social conditions with which they are surrounded. If the habits, privileges, ideals, and conceptions of life among women were the same as among men, society would be overwhelmed with sexual promiscuity, for it is conceivable that women would become in their sexual habits similar to men.

In this temperate zone puberty begins in the male at from ten to fourteen years and in the female at from eleven to fourteen.

There is not much difference between the two sexes in this respect; the slightly earlier period in the male may be due to environmental influences.

The term "sexual morality" is also much employed. In discussing this subject, morality should not be separated from the scientific viewpoint. There is a tendency to separate them as tho science had no business with morality. It has. The mistake which society has always made has been to relegate the science of morals to an especially unscientific class. This subject cannot be discussed apart from morality. Society has too long made the mistake to think of morals as something esoteric and immaterial. It is my view that morality without a physical basis is not morality at all. There is no such thing as spiritual morality. If sexual practices, marital or extra-marital, do not cause harm to any individual, alive or yet unborn, those practices are not immoral. No man can harm any extra-natural omnipotence. Immorality consists in harming people; and that means one's self as well as others. This is decidedly a question inseparable from morals.

Let us consider the physiology of the sex organs in their relation to continence. The mistake should not be made to think of the sexual organs as dormant excepting at a certain period of life. They begin to functionate before the child is born, and continue thruout life. The internal secretions of these organs, circulating in the blood, influence all the cells of the body. They modify the shape, growth, and texture of other structures, powerfully influence the central nerve cells, and are potent factors in stamping the individual with character. Sigmund Freud, in "Infantile Sexuality" ("Three Contributions to the Sexual Theory") describes the early signs of sexuality. The earliness of their beginning cannot be identified. At the other end of life they are illustrated by the reply of the aged French savant, who, upon being asked, "When does a man cease to love?" replied, "You must ask someone older than I."

Sexuality and sexual impulses begin and end with life. Nor should the mistake be made to think of the pelvic organs as constituting the whole sexual system. The internal secretions which have a strong influence upon sexual character come not only from the ovaries, testicles, uterus, and prostate, but also from the thyroid, and, perhaps, from the hypophysis, suprarenals, parathyroids, thymus, and other organs of which little is known.

Sexuality is general, not local; and, properly speaking, the sexual organs are all the organs of the body. The fact that there are certain highly specialized parts, and that there are superficial areas which are especially sensitive to erogenous impulses, has given these regions special sexual significance, while but little is known of the other organs as sexual centers. I desire to bring out the fact that the sexual organs are constantly in action, and that repression is both impossible and undesirable.

External sexual excitements have the power to cause a pre-boys and girls, just as intellectual excitements or stimuli have the power to heighten the intellectual functions. Excessive, continuous, or prolonged stimulation of the erogenous zones results in exaggeration, or later exhaustion, of the libidinous impulses. Testicular fluid in the seminal vesicles, under unexciting conditions, does not require to be discharged at intervals. I have not been able to find in the studies of the physiologists that its retention is abnormal or unhygienic. I do not believe it is.

The ejaculation of this fluid takes place as a result of erogenous excitement or local stimulation. Involuntary emissions, masturbation, or coitus empty the vesicles; but without some preliminary causative influence ejaculation does not take place. The dogmatic statement is sometimes made that these emissions are necessary for the health of the man. This contention is not substantiated. The idea is kept alive by those who wish to believe it in order to justify their own practices, by those who perpetuate a tradition, and by those who actually regard it as a scientific fact. I do not believe that continence is injurious to the male, provided that his continence is real.

The common mistake is to think of coitus as synonymous with incontinence. I have tried to show the difference. It is undoubtedly true that idle men, living under the abnormal and unhealthful conditions of city life, lending themselves to erotic stimuli of great variety, thinking lustfully of women, and rolling their eyes about for libidinous suggestions, are promoted in health by completing the sexual act which they always have in process of beginning. It is not coitus that preserves their health; it is the preliminary vicious habits that are damaging it. Coitus is called upon as the remedy. Having begun the sexual act, it is normal that it should be completed.

But the healthy man, whose mind is occupied with whole-



some thoughts, who has interests and activities for the working hours and enough knowledge and intellect to make relaxation a joy—such a man does not suffer from mere lack of coitus. The vacant mind, ennui, tobacco, alcohol, and other promoters of defective oxidation are often the precursors of the sexual necessity.

An unmarried young man of the above described healthy type, who argues that some day he shall marry, who thinks that somewhere in the world the woman is waiting for him, who does not harbor the delusion of the sexual necessity, who has resolved that he shall expect virginity of his bride and that she may expect the same of him, who is aware of the harm and dangers of extra-marital coitus, and who, having thus fortified himself, dismisses from his mind the whole question as settled for him—such a man has clear sailing. The fellow who gets in trouble is the weak man, who vacillates, who entertains erogenous thoughts with himself as a party, and who goes half way and attempts to recede—he has no business with the single standard of sexual morals; it will make a fool of him. *Dalliance is not abstinence.*

I do not conceive of a man suffering from the ills of continence or growing impotent who has been cast away on a desert island, with no immediate prospect of relief, and whose mind and hands are occupied with raising grain, catching fish for subsistence, and constructing a boat for escape.

Examinations of many unmarried men show congestion of the prostate and prostatic urethra, due to just these uncompleted sexual activities. The continuance of the sexual excitements without completing the sexual act perpetuates the congestion, until in the course of time impotence supervenes. What is the remedy? Removal of the cause, ceasing from sexual excitements which cannot be completed. The remedy is not taking another step, fraught even with greater possibilities of harm and danger.

The dangers and objections arising from violation of the rule, that a man should have sexual intercourse with none but his wife and that if he have no wife he shall remain continent, are as follows: *the moral and social degradation of a woman who otherwise would live rightly; the danger of causing disease in such a woman; the encouragement, by example, of a practice which stands preeminent as the great cause of social unhappiness; the subtraction of just so much joy and devotion from the woman*

*who should or will stand in the proper relation of wife; the possibility of the propagation of illegitimate children; the strong probability of contracting venereal disease; the danger of transmitting physical or moral blight to one's offspring; the development of vicious habits; the cultivation of immoral society; the wasting of time and energy in unprofitable company; the social harm to one's self and family; the moral harm which springs from acting in secretiveness and shame; the contracting of the concomitant vices which go hand in hand with venery for venery's sake; and the postponement of the organization, or the weakening of the strength, of the most potent factor in the solidarity of society—the home.*

These are strong reasons against extra-marital sexual congress, and each is susceptible of serious consideration.

Congestion of the deep urethra is found also in the incontinent as well as in the continent. Excessive coitus is said by good authorities to be a common cause of physical deterioration. Is it not possible that the individuals who need coitus as the remedy for their ills are the same as those who later suffer from the harm of excess? And is it not possible that, single or married, they will permit their sexual impulses to do them injury? The pity is that a woman has to be dragged down with them.

To concede that coitus is essential for the health of unmarried men is to concede the desirability of a chain of social conditions which are the concomitants of the concession. Who shall be the woman to preserve his precious health? He would prefer a comely young woman for seduction, but suppose we grant him the prostitute? That means regulation of prostitution. Regulation of prostitution means legal approval of the double standard of sexual morals, the increase of the proportion of unmarried men and therefore of unmarried women, and the diminution in the ratio of homes to population. I am opposed to the legalization of prostitution.

All that has been said of men may be said of women. They are harmed quite as much as men by empty minds, ennui, idleness, and erotic suggestions. Such women create their own internal stimuli. They long for love. The unsatisfied longing inflicts constitutional damage. As men become hypochondriac and impotent, so do women become neurotic and sallow,—all from the uncompleted stimuli of sexual love.

The true remedy in both cases is normal social love and marriage. If it cannot be had, the next best thing is the elimination of the sexual stimuli or supplanting them with less erogenous impulses. Given, a woman capable of sexual love and its highest gratifications, deny her these things, and she may be preserved in usefulness and happiness if she but become engrossed in occupation. On every hand we see women who exemplify both types.

This discussion is made necessary because of the bad social conditions in which we live. The remedy is an economic one. When an equable distribution of the proceeds of his labor goes to the worker, and there is no bonus for the maintenance of an idle class, when a true social democracy is secured, then the relations of men and women may be adjusted in harmony with the highest possibilities of sexual morals,—and not until then.



## CHAPTER XVI

### MENOPAUSE

*(Climacteric; Change of Life Critical Period.)*

JUST as the elderly years first, then old age mark the end of life in general, so the "change of life" shows the generative organs are no longer active, and we have sexual death. Menstruation ceases as it begins at no fixed age. Of a series of European women the dates were as follows: Thirty-five to forty, 320; forty to forty-five, 736; forty-five to fifty, 1,117; fifty to fifty-five, 423. It is somewhat later in cold climates, thus while in Marseilles (France) it was 47 years, in Petrograd it was 49. Virgins together with married women who have never borne children, are apt to pass through this epoch sooner than the mothers of families. Working women, owing to hard work and insufficient nourishment, generally reach the change of life several years ahead of those in better circumstances. Again, when the flow begins early it lasts late in life, as a rule; though to this, as to every other rule, there are numerous exceptions.

Sometimes the flow stops suddenly, the amount lost growing less and less until the absolute stoppage. As a general thing, however, the time is prolonged for from several months up to a year, or 2 or 3. The length of the interval between the successive flows becoming longer, from 6 to 8 weeks, and there may be considerable irregularity as during the onset at puberty, a profuse flow alternating with a slight one and so on.

When the flow stops abruptly there is great danger of violent nervous and other disturbances. On the other hand, when the intervals between the periods lengthen gradually, while the flow grows less and less, there is not apt to be so much disturbance of the health generally. Strange to say a sudden stoppage is sometimes thought to be due to pregnancy.

There is often considerable mental disturbance at this "critical period," women realize that old age is not far off, and with it the fading of their personal charms. In some instances there is actual unsoundness of mind, the "climacteric insanity" so-called, which may pass off gradually or remain for the balance of life.

Some happy individuals of a philosophic turn of mind, once they know the discomfort of the monthly periods, and the pain and worry of bearing children are past, make the best of the situation. Their strength, both of body and mind, increases so much that they often pass the remaining years of life more satisfactorily than at any previous time.

It often happens that just before or at the start of the change of life, some women surprise their husbands and themselves by increased sexual desire and by increased pleasure during the act, even with individuals "frigid" during the whole previous married life. A similar state of affairs is often noted where an artificial "change of life" has been brought about in early years by the ovaries being removed for tumors, abscesses, etc., though in such cases the increased desire does not last very long usually.

Occasionally tumors in the womb which had set up profuse or continuous bleeding, shrink up once the "climacteric" is over and cause no further trouble.

A most serious state of affairs occasionally manifests itself. After the "change" is apparently done with, bleeding begins once more, and the woman confides to her friends that she is "unwell" again. Unfortunately, this generally means the first sign of one of the most terrible afflictions of the female sex, and that is *cancer of the womb*. It is to be hoped for the peace of mind of any reader to whom this happens that *not a day be lost* in consulting the family physician.

As it became recognized that sex is not merely a matter of difference between the primary characters, a whole host of secondary sexual characters became recognized in turn, according to Corner. Among these are the shape of the body, the muscular development, the development of fat, the breast, the chest, the beard and moustache, affections, voice, inclinations, and numberless mental traits. All know the thin, angular woman with deep voice, incipient beard and moustache just as well as we know the plump, rounded man with a high-pitched voice and hairless face. Further, we recognize that the assumption of certain male characters are physiologic to women after their sexual life is ended at the change of life. This is curious, because if a male child fails in sexual development he tends to the child-like or female form. But after her sexual life is over a woman often tends to masculinity.

So far as the health measures called for at the menopause are concerned, only some general rules can be referred to, readers will be preferably better off if they consult their family physicians, and be guided by their advice.

The change of life ushering in elderly and then old age, there is no longer the monthly drain on the system, and only enough food need be taken to repair the wear-and-tear of everyday life. Other things being equal, it will be well to increase the amount of vegetables in the diet, and to drink plenty of water. Every adult has learned by experience, often very distressing, which articles of food agree with them and which do not, and the woman at the climacteric should be no exception. There is considerable tendency to accumulation of gas in the bowels, and any food which starts this up should either be greatly reduced or omitted entirely.

The bowels need especial attention, a daily evacuation being secured—by injections, salts or oil as preferred. In most cases this daily passage can be had by selection of the proper articles of diet. Some daily exercise should be taken, and by “exercise” we mean that in the fresh air. Turkish baths will probably help, especially in stout women; as may massage every week or maybe twice a week. Local cleanliness is now of great importance, the external genitals should be bathed each day with warm water, and it is better to wipe off the parts after each bowel movement and passage of urine, with a little wad of cotton wet in warm water. If this be neglected, an intolerable itching is very apt to appear, which makes life miserable, by a constant irritation, interfering with proper sleep.

#### THE CHANGE OF LIFE\*

The change of life, or menopause, is the term applied to the period of time when a woman is passing from the condition in which it is possible for her to have children to the condition when it is not possible, owing to the decline and eventual cessation of her sexual quality.

The most conspicuous sign of the change of life is the change in and final cessation of the menses, but there are a number of other accompanying signs. Some of these are obvious to the woman herself, some are only known to medically-trained men.

---

\* Dr. G. T. Wrench in *The Healthy Marriage*.



With the former this chapter will deal; with the anatomical and functional changes in the womb and ovaries, which are associated with the symptoms, the chapter will not deal. It is sufficient to state that all the generative organs undergo atrophy [wasting].

The age at which the change of life sets in is various. In Northern Europe it usually sets in between the ages of forty and fifty, most commonly between forty-five and fifty. If it does not occur in this decade, it is more usual for it to begin after fifty than before forty. It rarely begins before thirty-five or after fifty-five.

The causes which tend to produce an early onset of the change of life are those, which, in general, have had a weakening effect upon the woman. Such are a succession of exhausting pregnancies, severe fever after childbirth, the death of a much loved husband, the troubles of unexpected poverty, a life of sterility, and the destruction of health by disease. Excessive stoutness is also associated with an early onset of the change of life. Sometimes the change may unexpectedly follow a pregnancy or miscarriage which has been accompanied by severe hemorrhage. Prolonged nursing stretching over three years is said sometimes to induce an early change of life. The change is usually late in its onset in women who have led healthy and successful sexual lives, who have been happily married, have had several children, whom they suckled, and who have enjoyed good health.

Menstruation may in rare cases cease at a comparatively early age and, after an interval of some years, may recommence. These rare cases are very peculiar, for pregnancy may actually occur in the interval of no menstruation. The recrudescence of menstruation may be due to other causes, and therefore is always a reason for asking medical advice.

The time occupied by the change of life is also various. Sudden and permanent cessation of menstruation, whether occurring at the usual date or not, is commonly consequent upon something abnormal, such as childbirth with severe hemorrhage, an acute infective fever, or a great shock. It is, therefore, associated with some grave condition, which in itself causes a woman to place herself in the hands of a medical man.

It is usual, of course, for the change of life to begin gradually and occupy many months in its fulfilment; indeed, some three years may be said to be the average period during which some

symptoms of the change are felt by a woman. Sometimes it occupies as many as five years.

The prominent sign of the change is the alteration in the menstruation. The alteration may be summed up in the loss of regularity and usualness. The regular amount lost at the menses also changes. It is usual for the length of time between the menses to increase. Instead of being twenty-eight days the interval becomes one of six weeks, ten weeks, six months, a year even, and then again shorter intervals. The irregularity is so great that in each woman it shows some peculiarity. In quantity the same irregularity and inconstancy is shown. Usually, the flow is scantier. In rare cases scantiness of flow without marked change in the intervals between the menses is seen. In other cases there is an increase of flow, which may amount to actual flooding, making the woman pale, and this may be followed by a scanty flow at the next period. The changes, generally, are so varied that detailed description is useless, every variety and combination of varieties occurring. A woman, therefore, need not be alarmed by any peculiarity she thinks is hers. I advise her, however, whatsoever the particular form of change that occurs, always to consult her doctor. To my mind, for a woman to ask advice whensoever the regularity of her periods is changed, is a golden rule for the care of her health. There are some serious causes to change in the character of the menstruation, and these serious causes screen themselves, as it were, behind natural causes, and are overlooked in this way. But if a woman follows this rule, they will not be overlooked, unless their nature is so obscure as to escape a medical man.

A great number of other changes occur with the change of life besides the alteration in the character of the menstruation. Indeed, the term "change of life" itself is a very apt and descriptive one. The change is a *complete* change. The whole constitution of the woman and the view of life she tends to take alters. Again, the effect of the change upon women is as variable as are their characters. Upon the healthy and maternally successful women the change of life does not, as a rule, lay a heavy hand. Indeed, it seems scarcely to affect them. They glide smoothly into the period of honorable age. Such, clearly, is the positive natural course. It should be possible to live without the infliction

of critical years, and it is possible. It is, fortunately, not infrequent. But there is also the less happy picture. There are, unfortunately, a number of women who do suffer at this time. They feel the irregularities and eruptions of the transition period very markedly. They pass through a period of physiological anarchy. Consequently, the change of life has been called the "critical age." In its manifestations and diversities it is undoubtedly a critical age, and it is even asserted that there is a greater mortality at this period than at other times of life. Other statisticians, on the other hand, contradict this assertion. But whatsoever figures may say, common experience shows us that the term "critical age" is thoroughly justified.

The kind of women who suffer most at the change of life are those who have suffered before the change of life sets in. A stable constitution can endure a period of anarchy, but a weakly one suffers proportionately. Consequently it is wise to enter into this period of life in the best state of health possible. At any time ill-health is troublesome and depressing, but one may say that ill-health during the change of life is ill-health multiplied by two or even four.

If one had to name the particular feature of the change of life, apart from, though associated with, the changes in menstruation, it is the anarchy, as it were, of the circulation of the blood and of the nervous system. Congestions and aberrations of the blood and nerves cause the various disagreeable symptoms from which women suffer at this time. Thus the circulating system is guilty of strange doings, which at other times might excite alarm. Not only is there a tendency to flooding, which itself is an unusual feature of the circulatory system, but there are apt to be hemorrhages from other parts. Nose-bleeding, unless severe, is a welcome relief to a full-blooded woman. It is interesting to note that the end of menstruation not infrequently repeats the character of its onset in this and other symptoms, so that if nose-bleeding was a characteristic of the period of the onset of menstruation, it is likely to be a character of the change of life. The same, indeed, may be said of indigestion, nervous conditions, or any other symptoms.

Another distressing irregularity of the circulatory system that may vex a woman at the change of life is palpitation. Following upon some exertion or emotion, or for no apparent



reason, the heart begins to throb. The throbbing heart causes the greatest discomfort to a woman. She feels a rush of blood to the head, her head is hot with severe headache, her cheeks burn, she sees little black things dancing before her eyes, she hears a buzzing noise in her head, she is giddy, she thinks she is going to faint, her pulse beats very rapidly, she feels she is going to choke, she is sure that there is something seriously wrong with her heart and she lives in dread that she will be visited by a stroke. But she can be assured that there is nothing seriously wrong with the heart. The change of life never causes heart disease. She can, therefore, be assured that, though undoubtedly disagreeable to her, the palpitations only show a disturbance of the normal traffic of her life, and when order gets rehabilitated she will be no more troubled. Meanwhile a strict attention to the rules of hygiene, mentioned at the end of the chapter, with sometimes a suitable medicine from a medical man, will often work wonders for her. There is only one thing, however, she should not do. She should not take a glass of wine or spirits when she feels giddy and faint. It will do her no good. As a fact it will make her headache and flushing worse. She may, however, feel mentally better for the time being, and therein lies the danger of these restorative nips for a condition like palpitation, which at times may be frequent.

A frequent circulatory sign associated with, but sometimes separated from, palpitations, is the rush of blood to the face causing the cheeks to burn. This symptom again shows the resemblance between the period of the onset and that of the cessation of menstruation. An elderly matron with grown-up children may be exasperated to find herself blushing like a young girl at some casual personal reference to herself, or at a remark which, at other times, she would scarcely notice. The rush of blood so easily brought about may as quickly leave her cheeks and pass to some other part of her body, making her back or abdomen feel suddenly warm. The flushings are sometimes associated with outbreaks of perspiration. Even when menstruation has ceased the flushings are still apt to recur and so prolong the period which the symptoms of the change endure. They are apt to be exaggerated at times so that the woman feels she is going to be unwell, but she is not unwell. They are mitigated by a careful regard for the health and eventually pass away.

Other conditions, which are secondary to the disturbed womb and circulation, are an unreliability and disturbance of the digestive functions. There is a congestion of the lining membrane of the bowel, which may manifest itself in attacks of diarrhea, sometimes alternating with constipation. There is a tendency for a woman to feel "liverish," with lack of appetite and heavy feelings after meals, and she may even have slight jaundice. Piles are apt to bleed at this time of life, and, unless the bleeding is severe, the loss of blood, as in nose-bleeding, does a full-blooded woman more good than harm. Heartburn, eructations, nausea and flatulence are further signs of the lack of proper order in the digestive organs.

The irregularity of the blood supply may also show itself in the skin. Flushings and the freedom of perspiration have already been mentioned. Tingling, itching, and pricking sensations in the skin are not uncommon. Skin eruptions may appear at this time, and a troublesome eczema or acne arise. Both are wont to affect the head and face. Here one may also mention the tendency of hair to appear on the face. These obvious disfigurements are very trying to a woman. The hairs can be removed, but whilst the change of life is in progress the skin eruptions can only be controlled. They cannot, as a rule, be cured. Fortunately, they are wont to pass away as the change becomes completed.

A very troublesome skin disturbance is that which causes itching and irritation of the private parts. Frequent bathing with a lotion of carbolic acid, one part to eighty parts of cold water, followed by powdering with a powder composed of boric acid one part, zinc oxide three parts, and starch six parts, or the use of ichthyol or coal-tar soap also stops the itching. If the trouble continues, a doctor can often better matters. Sometimes the itching is associated with the "whites," which are frequent during the change and sometimes show a periodic character as if they formed a substitute for the menses. For this a woman may try douching with boric lotion or lead lotion followed by a careful drying and powdering of the parts.

The nervous changes are as frequent as the circulatory changes at this period. The nervous system becomes unreliable, just as the circulatory system becomes unreliable. Changes in the sensibility of the skin are frequent. Tender spots and areas appear and vanish. Backache, neuralgia, pain over the heart or

over the stomach are all apt to visit women at the change of life, and show the general instability of the nerves. Irritability of temper is unfortunately common, and may be a great trial to the husband and children. Women are apt to lose their power of judgment, and their power to think clearly and to remember things. They become restless, hesitating, indecisive, moody, and depressed. Sometimes they sink into definite despondency. They fear they are going insane, just as at other times they fear they have heart disease. They sleep badly and are troubled by distressing dreams. A further evidence of the looking-glass resemblance of the cessation to the onset of menstruation is seen in the fact that these dreams are like young girls' dreams of love, enhanced by the knowledge women have acquired. There is, in fact, a recurrence in the desire for love, and in married women the need of intercourse, and, if they have had no children, the desire for children. Both of these latter symptoms may become excessive and pass as it were from the region of the will and sense of propriety. The pleasure in intercourse normally continues for some years after the change of life has occurred, but at the time of the change of life it may become so strong as to cause women considerable distress. The desire for children sometimes so surpasses the will and judgment that women actually make themselves believe they are with child. I had a Welsh patient once, who, though nearly fifty years of age and childless, was sent to the Rotunda Hospital in Dublin by a doctor for delivery. Both he and she thought this precaution needful owing to her advanced age. On examining her I found her stomach protruded owing to her being stout and also owing to her arching her spine in a peculiar manner. Such cases are by no means rare, and such women even eventually go through an imitation of childbirth. The historic example of this strange fantasy is that of Mary I. of England.

Finally, a general change in the body and figure is more common at the change of life than no change at all, some women becoming stout, some thin.

The list of ailments from which women tend to suffer at the change of life is, it will have been seen, a long one. These ailments are vexatious, they are a decided trial both to the women and the people of their households, until the final favorable outcome into normal health is reached. Not infrequently women



pass into a condition of health that they have not previously enjoyed. Lingering relics of the change of life may occasionally affect them even throughout the sixties. But such affections are only occasional and do not spoil the general enjoyment of health. Nevertheless, the years of the change of life are years punctuated with distress in the great number of women. Only the women who have had happy marriages illuminated by health, love, respect, the gift of children whom they have suckled, can hope to pass through it without affliction. In these afflictions again one seems to see a retributive justice dealt out to generations that have not based their civilization upon a wholesome and direct recognition of the physiological nature of men and women and its social regulation—without which the social life of man must be a mockery and a sham—namely, sex through marriage and the responsibilities and joys brought about by the procurement of children.

As a consequence all the recommendations and advice that medical men can give, by which the afflictions of the change of life are mitigated, are really recommendations of the observance of sound physiological life. The chief means by which these afflictions can be avoided are those already mentioned, namely, healthy marriage and healthy child-bearing and nursing. The life must be physiologically sound in order that its change may be also sound. Taking this for granted, one next has to consider what sort of hygiene and remedies may be adopted during the change of life itself.

One of the most useful remedies for the irritability, flushings, perspiration, insomnia, giddiness, and general circulatory and nervous discomforts, is the use of the hot bath. A woman should take such a daily bath at a temperature between 99° and 100° F., that is to say, a little above the temperature of the body, and stay in it for fifteen to twenty minutes, occasionally adding hot water to keep up the heat. This bath brings the blood to the skin. For the time being the irregularity of the circulation meets its master. The blood is generally summoned to the surface. The skin becomes pink; and this disciplinary measure has a decidedly good effect for the rest of the twenty-four hours. The hot bath is decidedly better than the cold bath during the change of life. The vigour the cold bath gives the body is wont to be irregularly exhibited. It is order rather than stimulation that the body needs,

and this order the hot bath brings. The skin after the hot bath should be well dried. If it shows roughness a free rubbing with lanolin should be used. In the private parts it should be carefully soaped, dried and freely powdered daily, if the parts tend to be moist.

Daily exercise is equally important to women at this time. They must not consider themselves invalids, but as people whose physiology is for the time being disorderly. Daily exercise should be taken. But, as regards special features, it should be a regular daily walk, and may be supplemented by some simple forms of gymnastics, such as are supplied by special apparatus. For women suffering from great irritability of the skin, the digestion and general feeling, general massage for half an hour a day is a very valuable remedy.

The bath, if taken in the evening, or general massage are also excellent means for gaining a refreshing sleep at times when sleep is troubled or interrupted by waking periods and distressing dreams. Abundant sleep is very valuable in helping to preserve the order of the bodily processes, and, therefore, women at this time should adopt regular hours for going to bed and try to get in one hour of sleep before midnight. Breakfast in bed has advantages at periods of exaggeration of the symptoms, for not only does it bring an extra period of rest, but it also prevents the occupations of the day, at such times tending to be felt as worries, being entered into too early in the day.

The food at this time must be as simple and well-cooked as possible. Stimulating foods or foods that add to the amount of uric acid are certainly to be avoided, for the body responds erratically to stimulus and displays an increase of symptoms and discomforts that otherwise are not particularly bothersome. Some foods as sweetbread, liver, kidneys or any glandular substance are unsuitable. Hot curries are unsuitable, Worcester, A-1 and other sauces unsuitable, any heating spices or condiments unsuitable. In the same way the amount of meat should be moderated and reliance placed upon eggs, fish, fresh vegetables and meat foods. A full meat diet makes demands upon a woman. It is a stimulating and exciting diet, and, therefore, at this time is decidedly unwise. Foods which help to keep the action of the bowels in proper order are particularly valuable. The sense of

fullness tells women in clear terms that the body requires relief, and, if the bowels are not properly open this sense of fullness is aggravated. Fresh and stewed fruits, green vegetables, lettuce, cabbage, cauliflower and fresh garden products, good jams and honey should be constituents of the daily table. Fresh milk is a good food, but should not be taken between the meals, for it destroys appetite.

In addition to these foods, which are beneficial in preventing constipation, an occasional purge of blue pill, a dose of salts, Apenta water or vegetable laxative will bring a woman great relief, for the free action of the bowels is very efficacious in relieving the general congestion of the body.

The liquids taken at this time should also be bland. I strongly advise women at the change of life to give up alcohol in all forms, or at the most to take only a little light wine. Alcohol tends to act like a trigger to a cap, and sets up an explosion, which by timely wisdom could be avoided. Strong tea, strong coffee, strong beef extracts are for similar reasons inadvisable. Water is the best drink; the mineral waters are also good.

It need hardly be said that intercourse is a cause of excitement and should be moderate at this time. If women find desire troublesome and its frequent satisfaction followed by depression, irritability and other signs of nervous instability, let them consult their doctor. Some local treatment may cure them.

Occasional rest in bed is valuable, but to give up daily occupations is folly. Only let them avoid occupations that worry them or exhaust them. Let them be moderate at this period of physiological anarchy and their reward will consist in the moderation of its symptoms and a calmer passage to the healthy and stable years that follow it.



## CHAPTER XVII

### PREGNANCY

WHILE a woman can only have one child in a year, a man could have ten or a dozen by as many different mothers. On the other hand, once the man deposits the spermatozoa in the genital passages of the woman, his part is finished—while that of the woman has only begun. The difference is well set forth by the English biologist, Heape, as follows:

The woman produces a germ-cell, an ovule [egg] and when this is fertilized she protects it while it develops; she provides the growing embryo with nourishment, during the whole nine months of pregnancy, and, when the child is born, she is designed to provide nourishment for it for still many more months. Thus the only part of the reproductive process which is similar in man and woman is that which concerns the elaboration and production of the germ cells. After conception the onus of the whole of the rest of the process is borne by the woman.

#### THE DEVELOPMENT OF THE OVUM

We must here repeat that menstruation, or ovulation, is the passage of the ripened ovum, or germ-cell, from the ovary through the genital channels of the human female. The process recurs normally once in every 28 days, and continues to recur until the critical age, or “turn of life,” is passed, when the organism is no longer capable of developing ova.

The ovum of the human female consists of a vitelline membrane, yolk, and the germinal vesicle (protoplasm) containing the germinal spot (nucleus). As the nucleus of a cell is to be regarded as a specialized portion of the protoplasm, for the sake of convenience, that form of protoplasm which constitutes the cell-body is termed *cytoplasm*, while that which constitutes the nucleus is called *karyoplasm*.

We have already spoken of the structure of the human ovary, and of the Graafian vesicles, or follicles—so named after their discoverer, Regnier de Graaf, a Dutch physician—or ovisacs, which are developed within the stroma of the ovary. During their

earlier development the Graafian vesicles are situated deeply within the substance of the ovary, enlarging as they approach the surface, where, as has already been described, they appear as small boils on the exterior of the organ. The Graafian vesicle undergoes material changes prior to its rupture, its walls becoming more vascular externally, and being thickened internally by the deposit of a substance which consists of an aggregation of cells.

Before the moment of discharge of the ovum, the number of the nuclear elements, or chromatin bodies, in the germ-cell is reduced, which process is known as *maturation*. In the great majority of animals the nucleus of the ripe ovum divides twice in rapid succession, and two minute cells are given off. These come to nothing, though one of them may again divide; they are to be regarded as "abortive," unsuccessful sister cells of the ovum which has extruded them. But in many cases it is clear that, as the result of this two-fold division, the remaining nucleus of the ovum (technically called the female pro-nucleus) has suffered a reduction in the number of chromosomes—readily stainable bodies by one half. The number of these chromosomes, or chromatin bodies, in the cells of an animal is definite and constant for each species, and the result of this process of maturation is that the number of nuclear elements in the ovum which is now ready for the essential act of fertilization is half that which is characteristic of the somatic cells—*i.e.*, body-cells—of the animal. (We have already spoken of the distinction between the body-cells and the germ-cells; how the somatic, or body-cells, are off-shoots from the germ-cells, but how the germ cells remain unmodified, unspecialized, to continue unaltered the organization of the fertilized ovum from which the creature arose, owing their peculiar power of reproduction to retention of the original organization of the fertilized ovum.)

But during the history of the male sperm cells a somewhat similar process of reduction in the number of chromosomes has also taken place, so that when ovum nucleus and sperm nucleus come together in fertilization, the number of chromosomes characteristic of the species is obviously to be found in the fertilized egg-cell. As E. B. Wilson puts it: "There are still many difficulties and discrepancies, especially when plants are considered alongside of animals, but the one fact of maturation that stands

out with perfect clearness and certainty amid all the controversies surrounding it is *a reduction of the number of chromosomes in the ultimate germ-cells to one-half the number characteristic of the somatic cells*. It is equally clear that the reduction is a preparation of the germ-cells for their subsequent union, and a means by which the number of chromosomes is held constant in the species."

After the ovum has passed through the process of maturation and has been discharged by the bursting of the ovisac, the vesicle becomes atrophied and obliterated much in the same manner as a boil on the surface of the skin passes away after bursting. The vesicle, during its process of retrogression, appears as a yellow body on the surface of the ovary, such bodies being called *corpora lutea*. It is remarkable that the corpora lutea of menstruation—that is, of Graafian vesicles which have discharged ova from which pregnancy has not resulted—disappear much sooner than, and differ very much in appearance from, corpora lutea of pregnancy. The corpus luteum of pregnancy is much larger and does not disappear until the ninth month, while the corpus luteum of menstruation has disappeared altogether by the sixth month.

The matured ovum, on its release from its ovarian bed, is grasped by the fimbriated extremity of the Fallopian tube, along which it is helped to pass by the wave-like motion of the cilia which line the mucous coat of the tube. The passage of the ovum from the ovary to the vulva usually occupies from eight to twelve days, although there are many cases in which, owing to disease, weakness or torpor of the uterine system, the passage of the ovum may be so slow as to occupy nearly the whole month.

The process of menstruation, which corresponds in nearly every respect with the rut of animals, is attended in normal women by an increase of sexual desire, and it is at these periods that married women are most liable to pregnancy. It is also about these times that there is an increase of nervous irritability, and women should on this account avoid all unnecessary excitement, while taking every available opportunity of resting themselves. Women should at all times, so much does uterine health depend on the general health, strive to keep their physical condition at the highest possible level by means of open-air exercise, plain food, sensible dress, and regular habits.

It is not surprising then to find that the duties assigned to



woman in this matter are attended by other essential economic differences throughout her body. During pregnancy the whole of her organs are affected in sympathy with the requirements of the growing child, and under natural conditions they all take their share of the extra work thrown upon them; or, if not so required, cease active work as much as possible. The strain of finding nourishment for the child affects the mother's power of assimilation and the working of her blood vessels; the burden



CHILD AT THREE WEEKS, SHOWING HOW IT IS ATTACHED TO WOMB

of carrying her child affects the poise of her body, the exercise of her muscles, and the condition of the nervous system. The functional activity of all her organs is modified to serve this great purpose of the woman's existence, and, normally, the increased activity demanded of some organs tends to decrease the activity of others which are not immediately required for this purpose. The brain is the chief example of this latter class of organs; the brain should not be strained at such times.

#### SIGNS OF PREGNANCY

The changes in the body set up by pregnancy are of two kinds: I. Probable (or symptomatic). II. Direct (or bodily).

(I) The probable signs, three in number, consist of stoppage of the menstrual flow, nausea and vomiting, and changes in the breasts.

The *cessation of menstruation* is usually the first change to make itself apparent. In nearly all cases it is sudden and abrupt, there is no gradual decrease in the quantity, nor in the frequency. Of course, to be of any significance, the cessation must occur in women previously regular in the monthly flow.

*Nausea and vomiting* are in evidence from about the second month; they are met with in about two-thirds of the women, and are most common soon after rising, hence the name, "morning-sickness." The prospective mother may only be "sick at the stomach" (retching) but no actual vomiting, or merely brings up thick mucus. In about two months these disappear, though they may last longer. (The dangerous cases are discussed later on under Disorders of Pregnancy.)

*Changes in the Breasts.* These grow larger—by the second month—there is a feeling described as "knotty," later on the veins under the skin are also enlarged. The skin about the nipple becomes much darker in brunettes, almost black; in blondes this feature is not so noticeable. Thin fluid (mucus, *not milk*) can be squeezed from the nipple occasionally as early as the third month.

(II) The direct signs, four in all, are made up of enlargement of the womb, changed color of the birth-canal lining, movements of the child, heart-sounds of the child. The signs in this class, depending as they do on the growth of the womb and its contents are more reliable—hence of greater value than those of first class.

*Enlargement of the Womb.* For the first three months the breadth and width of the womb increase more than the length. The size of about a goose-egg is reached by the eighth week; in eight weeks more, *i. e.*, the end of the fourth month, the womb first presses on the wall of the abdomen and can be readily made out by feel. (Though at the goose-egg stage it can generally be recognized by experts as enlarged.) By the end of fifth month the top is just below, and by the end of sixth month, just above the navel. The highest point occurs in the thirty-sixth week, just at end of breast-bone, in the last two weeks before birth the womb sinks down a little.

*Changes in Color of Birth-Canal.* From pressure on the veins by the growing womb, the blood is dammed up and in the



Fig. 1.

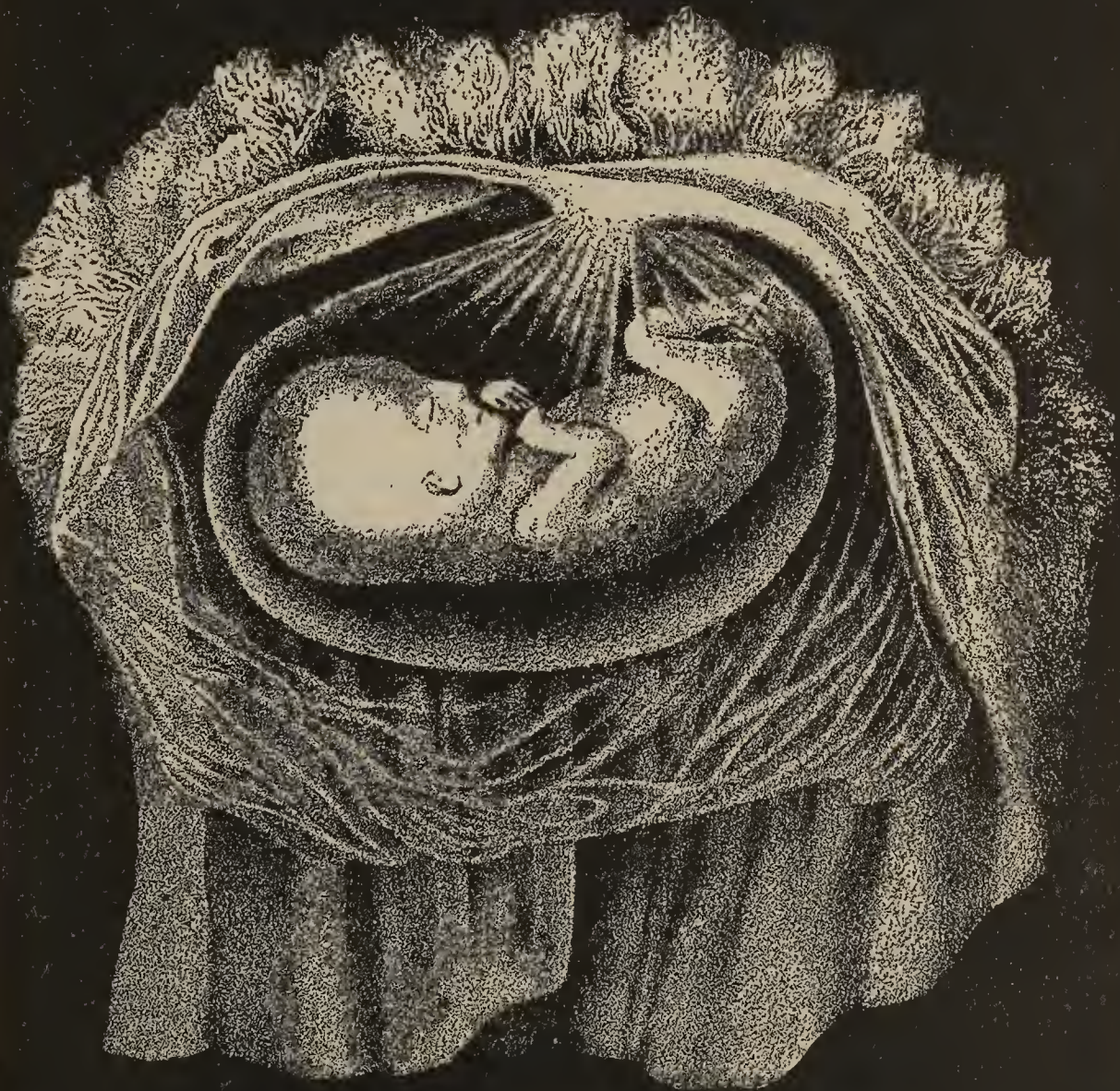


Fig. 2.

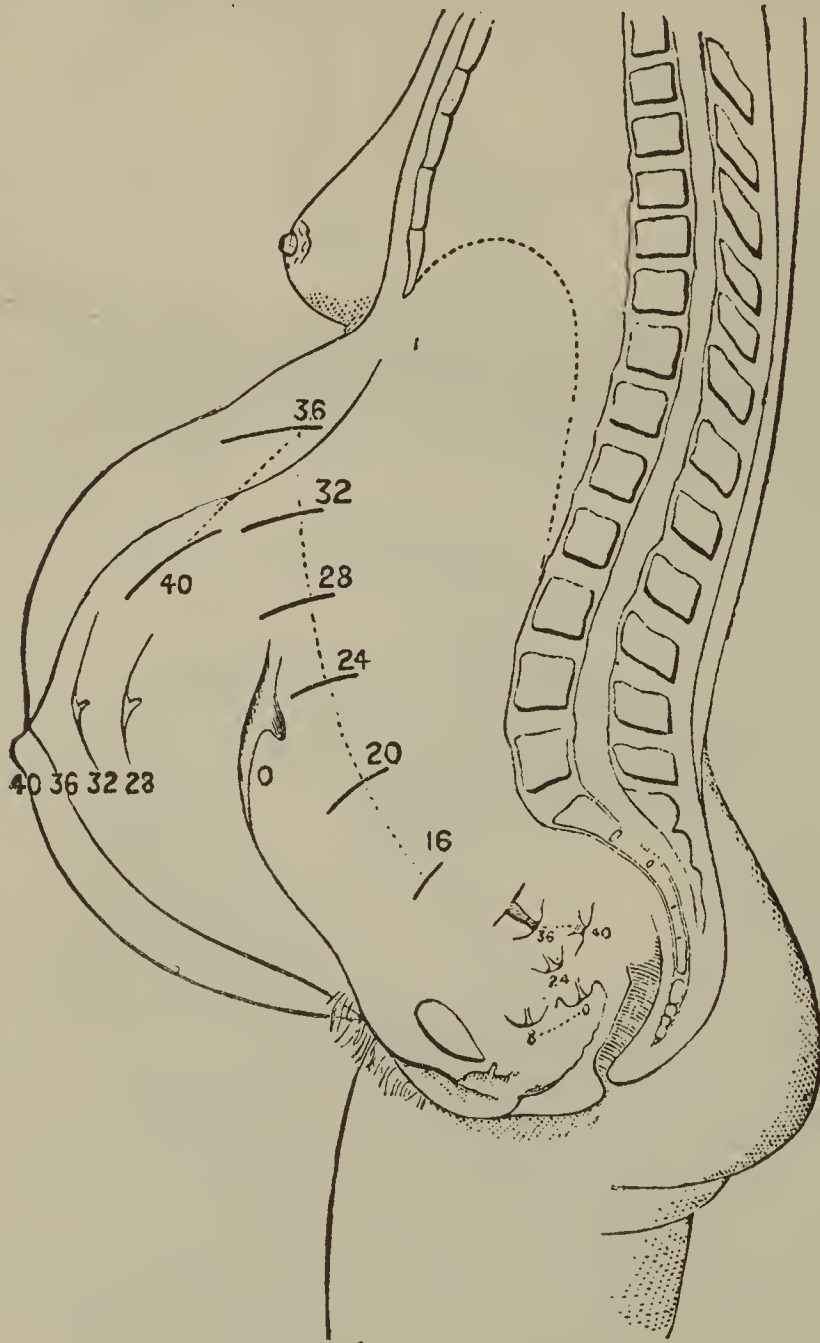
FIG. 1. CHILD AT NINE WEEKS, REMOVED FROM MEMBRANES (THREE TIMES NATURAL SIZE)

FIG. 2. CHILD AT TWELVE WEEKS WITH ITS COVERINGS (NATURAL SIZE)



early months there is a violet color of the neck of the womb, the birth-canal, and the external genitalia.

*Movements of the Child* generally begin about the 18th to 20th week. This is the time of "quickening," and often (especially with the first child) give rise to various disagreeable feel-



SHOWING HOW THE WOMB ENLARGES AS THE CHILD GROWS

(The figures refer to the weeks.) By the fortieth week, the womb sinks down again, and is about same level as at the thirty-second week.

ings, faintness, etc. When the pregnancy is well along these movements can be seen as well as felt, and can be started up by pressure on the womb through the abdominal-wall. They may be heard by doctors with their apparatus before quickening and before the heart.

*Heart-Sounds of the Child* are to be heard at about the same period (18th to 20th week). This is the most conclusive sign by far of pregnancy. When conditions are unusually favorable they may be detected several weeks before (15th or 16th week), and in any event they constantly grow louder as the pregnancy progresses. They are much faster, averaging 132 per minute, than in ordinary adult life, which is 72 for the same period.

(There are other signs, such as a change in the neck of the womb, which seems to become softer, etc., but these interest nobody but doctors.)

Of late years another means of detecting pregnancy has become possible, and that is the use of the X-rays. Occasionally in obscure cases, and in circumstances where pregnancy would be thought unlikely, resort to the X-rays reveals the shadows cast by the bones of the child within the mother.



SCHULTZE'S DIAGRAM FOR COMPUTING THE TIME OF LABOR

The figures between the straight lines show the exact number of days to be added for each of the months severally; those in parentheses are to be employed in leap-year. (The black figures—280—refer to the usual duration of pregnancy in days or ten lunar months.)

#### DURATION OF PREGNANCY

In human beings it is impossible to tell the exact date at which a given woman conceives. Even the time of the sexual congress which led to conception is not known as a rule. Moreover, where the date of copulation is noted, fertilization of the

TABLE FOR CALCULATING THE DURATION OF PREGNANCY

DIRECTIONS.—Find in the upper horizontal line the date on which the last menstruation ceased; the figure beneath gives the date of expected confinement (280 days).

Jan. Oct.	1 8	2 9	3 10	4 11	5 12	6 13	7 14	8 15	9 16	10 17	11 18	12 19	13 20	14 21	15 22	16 23	17 24	18 25	19 26	20 27	21 28	22 29	23 30	24 31	25 1	26 2	27 3	28 4	29 5	30 6	31 7	Nov.
Feb. Nov.	1 8	2 9	3 10	4 11	5 12	6 13	7 14	8 15	9 16	10 17	11 18	12 19	13 20	14 21	15 22	16 23	17 24	18 25	19 26	20 27	21 28	22 29	23 30	24 1	25 2	26 3	27 4	28 5				Dec.
Mar. Dec.	1 6	2 7	3 8	4 9	5 10	6 11	7 12	8 13	9 14	10 15	11 16	12 17	13 18	14 19	15 20	16 21	17 22	18 23	19 24	20 25	21 26	22 27	23 28	24 29	25 30	26 31	27 1	28 2	29 3	30 4	31 5	Jan.
Apr. Jan.	1 6	2 7	3 8	4 9	5 10	6 11	7 12	8 13	9 14	10 15	11 16	12 17	13 18	14 19	15 20	16 21	17 22	18 23	19 24	20 25	21 26	22 27	23 28	24 29	25 30	26 31	27 1	28 2	29 3	30 4	31 5	Feb.
May Feb.	1 5	2 6	3 7	4 8	5 9	6 10	7 11	8 12	9 13	10 14	11 15	12 16	13 17	14 18	15 19	16 20	17 21	18 22	19 23	20 24	21 25	22 26	23 27	24 28	25 29	26 30	27 1	28 2	29 3	30 4	31 5	Mar.
June Mar.	1 8	2 9	3 10	4 11	5 12	6 13	7 14	8 15	9 16	10 17	11 18	12 19	13 20	14 21	15 22	16 23	17 24	18 25	19 26	20 27	21 28	22 29	23 30	24 31	25 1	26 2	27 3	28 4	29 5	30 6	31 7	Apr.
July Apr.	1 7	2 8	3 9	4 10	5 11	6 12	7 13	8 14	9 15	10 16	11 17	12 18	13 19	14 20	15 21	16 22	17 23	18 24	19 25	20 26	21 27	22 28	23 29	24 30	25 1	26 2	27 3	28 4	29 5	30 6		May
Aug. May	1 8	2 9	3 10	4 11	5 12	6 13	7 14	8 15	9 16	10 17	11 18	12 19	13 20	14 21	15 22	16 23	17 24	18 25	19 26	20 27	21 28	22 29	23 30	24 31	25 1	26 2	27 3	28 4	29 5	30 6	31 7	June
Sept. June	1 8	2 9	3 10	4 11	5 12	6 13	7 14	8 15	9 16	10 17	11 18	12 19	13 20	14 21	15 22	16 23	17 24	18 25	19 26	20 27	21 28	22 29	23 30	24 1	25 2	26 3	27 4	28 5	29 6	30 7		July
Oct. July	1 8	2 9	3 10	4 11	5 12	6 13	7 14	8 15	9 16	10 17	11 18	12 19	13 20	14 21	15 22	16 23	17 24	18 25	19 26	20 27	21 28	22 29	23 30	24 31	25 1	26 2	27 3	28 4	29 5	30 6	31 7	Aug.
Nov. Aug.	1 8	2 9	3 10	4 11	5 12	6 13	7 14	8 15	9 16	10 17	11 18	12 19	13 20	14 21	15 22	16 23	17 24	18 25	19 26	20 27	21 28	22 29	23 30	24 31	25 1	26 2	27 3	28 4	29 5	30 6		Sep.
Dec. Sep.	1 7	2 8	3 9	4 10	5 11	6 12	7 13	8 14	9 15	10 16	11 17	12 18	13 19	14 20	15 21	16 22	17 23	18 24	19 25	20 26	21 27	22 28	23 29	24 30	25 1	26 2	27 3	28 4	29 5	30 6	31 7	Oct.

ILLUSTRATION: If menstruation ceased Oct. 11 the confinement will take place July 18. Or one day earlier if leap year.



egg may not have occurred for several days, the male elements (spermatozoa) remaining alive in the meantime. The longest survival of human spermatozoa known so far is three and one-half weeks. Of the thousands of spermatozoa which make their way up to the human egg, the only one which succeeds in effecting an entrance is the one the head of which first comes in contact with the egg. Changes rapidly take place in the covering of the egg which then prevent the entrance of any more spermatozoa.



THE ARROW SHOWS THE DIRECTION IN WHICH THE WOMB CONTRACTS AT THE TIME OF LABOR, AND FORCES THE CHILD THROUGH THE NECK OF THE WOMB INTO THE BIRTH-CANAL AND THEN OUT INTO THE WORLD.

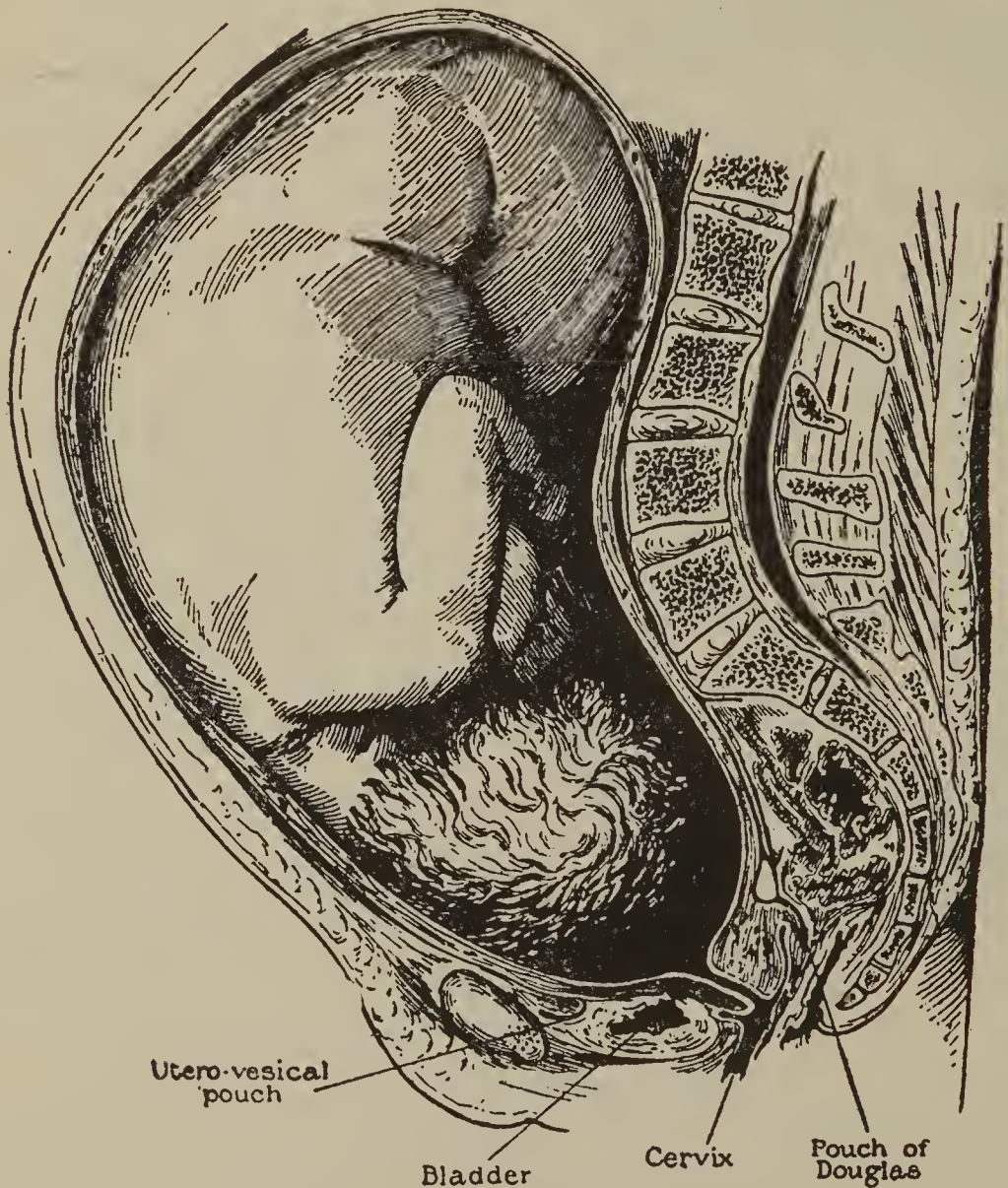
For the domestic animals it is possible to obtain more exact data, and in them it has been found there are considerable differences. Thus in mares, the average length of pregnancy is about 348 days, but extremes of 340 and 394 days have been observed; and while that of the cow lasts about 282 days, labor has begun as early as the 269th and as late as the 308th day. Hence it is possible in the human animal as well, pregnancy may be longer than usual, when it is probable the child will be larger than commonly the case.

Owing to the reasons just stated, the only date possible in

the human being is that of the last menstruation, and taking this as a basis in 650 instances, the pregnancy lasted from 253 to 315 days. The great majority, however, from 267 to 287 days (267 to 273 days, 102—274 to 280, 177—281 to 287, 140).

#### MISCARRIAGES

This term or else “abortion” is used when the products of conception are expelled before the child is capable of possible life. The time of viability is generally set at or about 183 days,



#### USUAL POSITION OF CHILD IN WOMB

Utero-vesical pouch, between womb and bladder. Cervix, neck of womb.  
Pouch of Douglas, between womb and bowel.

although children born at this time have much less chance of surviving than they do about a fortnight later. After the child is developed enough so it will probably live, instead of miscarriage the occurrence is called “premature labor.”

For some years past by the use of the well-known “incuba-



tors," many of these premature children have been pulled through and reached childhood, though they are usually smaller than when born at full-time.

#### CARE DURING PREGNANCY

As is the case throughout this book, it is expected the advice of the family physician will be sought and followed on all questions. Only some general hints being permissible:

There is no occasion to make any material changes in the daily routine of life. Some increase in the amount of food is usually necessitated, but this must be nourishing and easily digested, and the amount of flesh food should not be much greater. Women often overdo the question of eating, excusing themselves on the plea they "have two to nourish." It is generally believed that much of the serious disturbances which accompany pregnancy have their origin in an excess of meat.

Open-air exercise, moderate in degree, is important. The bowels are to be kept moving daily, preferably by appropriate food. General baths can be continued, but injections into the birth-canal must be resorted to cautiously.

Concerning the dress, all undue pressure must be avoided, corsets would better be left off. For the same reason garters are better replaced by hose-supporters.

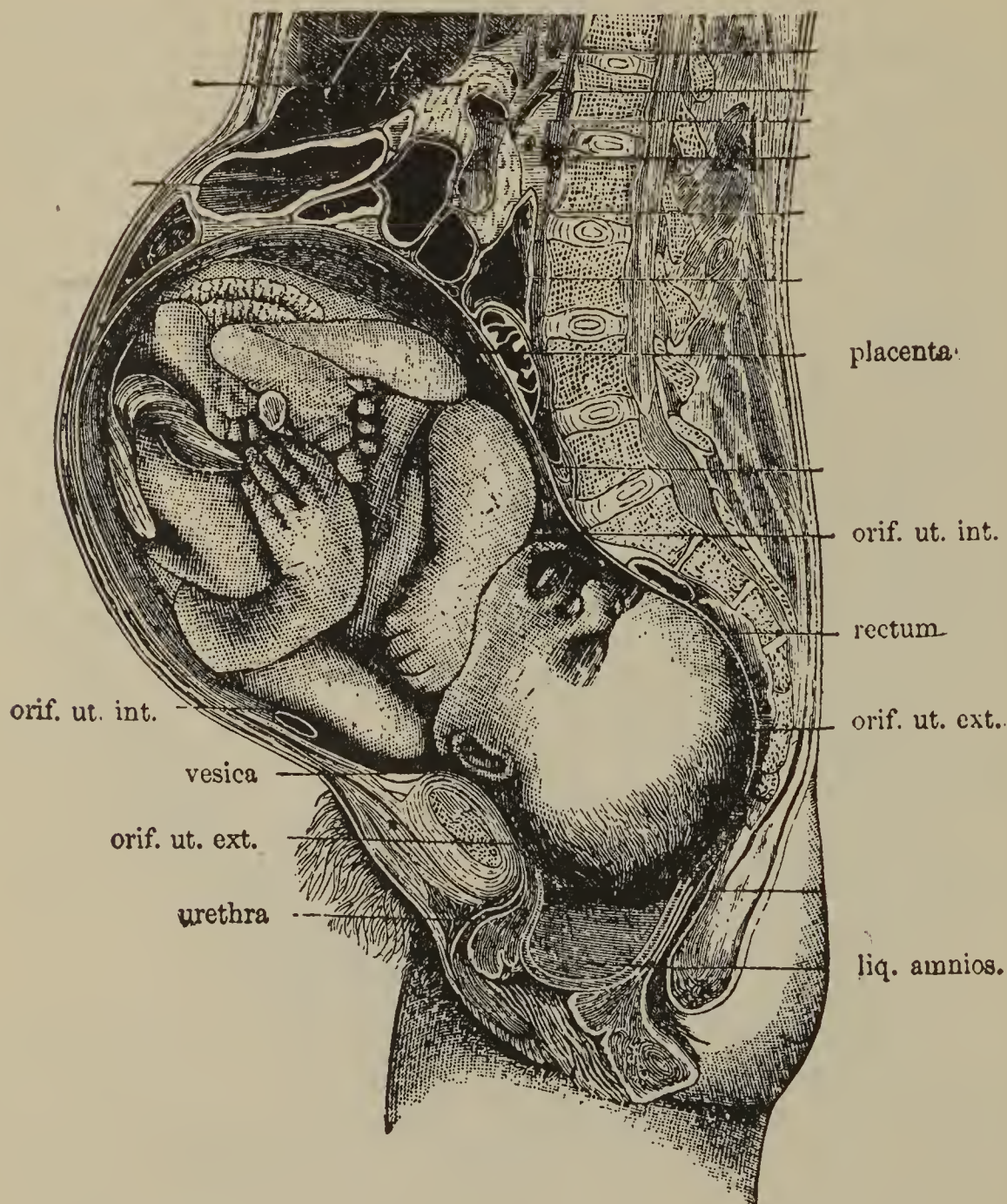
It is often useful to harden the nipples by washing them daily with alcohol and water.

#### DISORDERS DURING PREGNANCY

All there is need for here is the mere list, and there is some objection even to this, undue alarms may be excited. So the following is to be looked upon only as a catalog of what *might* happen, and fortunately many women go through pregnancy with discomforts merely of a minor degree. Should some untoward phenomena occur, the doctor who has been retained for the confinement is to be consulted at once. Of late it is becoming the custom for women to see their physicians at intervals soon after pregnancy begins. This has several advantages, it enables the medical man to keep better track of the pregnancy, and by examination of the urine frequently, he is often able by appropriate measures to ward off disagreeable—or even dangerous—complications.



The vomiting of the early months which is as much a part of pregnancy as is the enlargement of the womb, generally ceases about mid-way of the course (4 months or thereabouts). As we have seen it generally comes on the first thing in the



BODY OF WOMAN DURING CHILDBIRTH, DIVIDED IN THE MIDDLE LINE

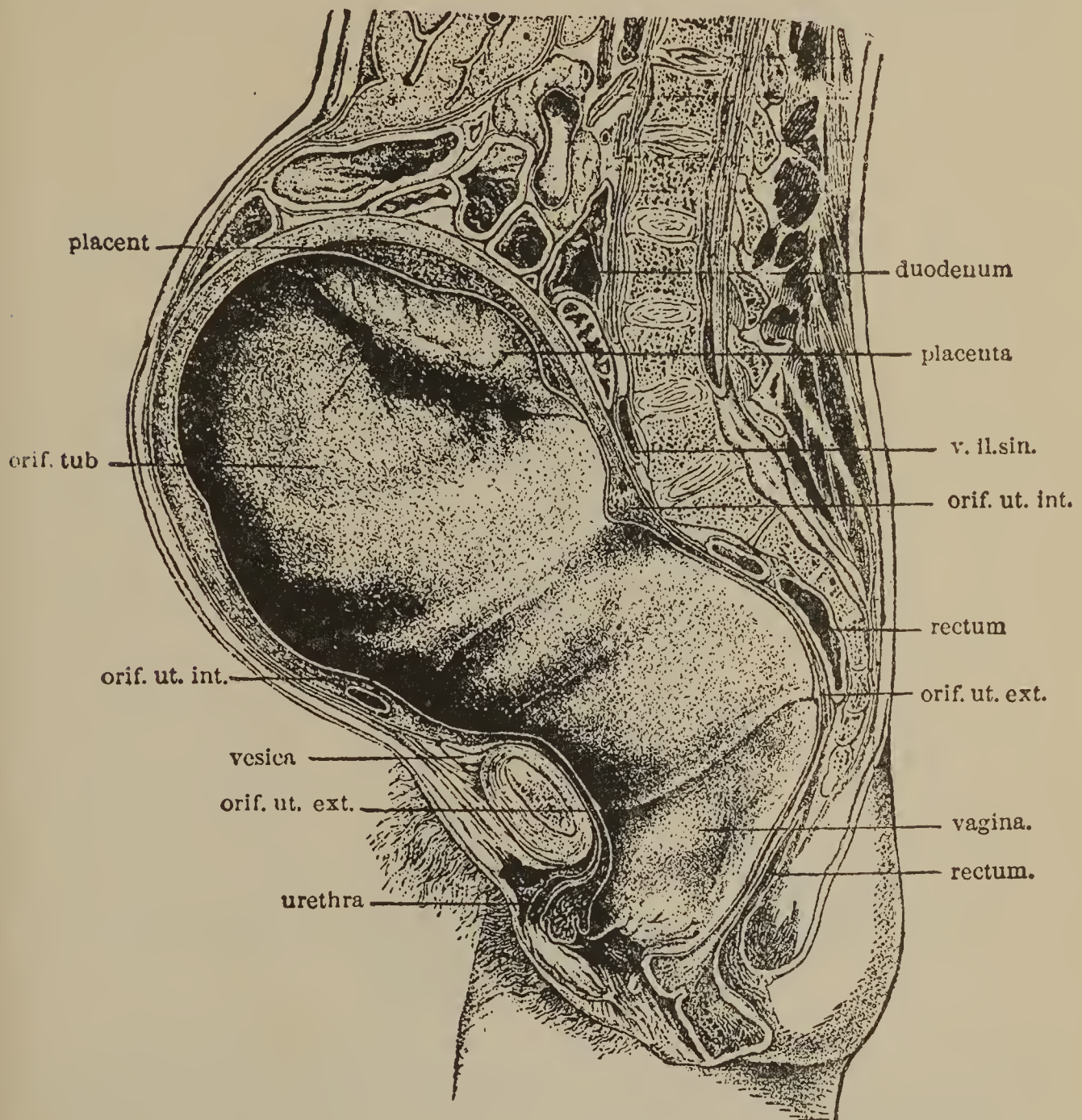
Vesica, bladder. Urethra, urinary channel. Placenta, afterbirth. Rectum, lower bowel. Liq. amnios, bag of waters.

morning after arising, in severe cases the vomiting may occur at any time of day, and last to the later months. The condition is serious and stubborn, sometimes requiring that the contents of the uterus be evacuated. In rare instances a fatal issue ensues.

Other digestive disturbances are common—constipation,



diarrhea, gas in the bowels, heartburn, "waterbrash." A very annoying complication (luckily not very common) is increased flow of saliva; it comes on about the same time as the "morning sickness," and is often very rebellious to treatment.



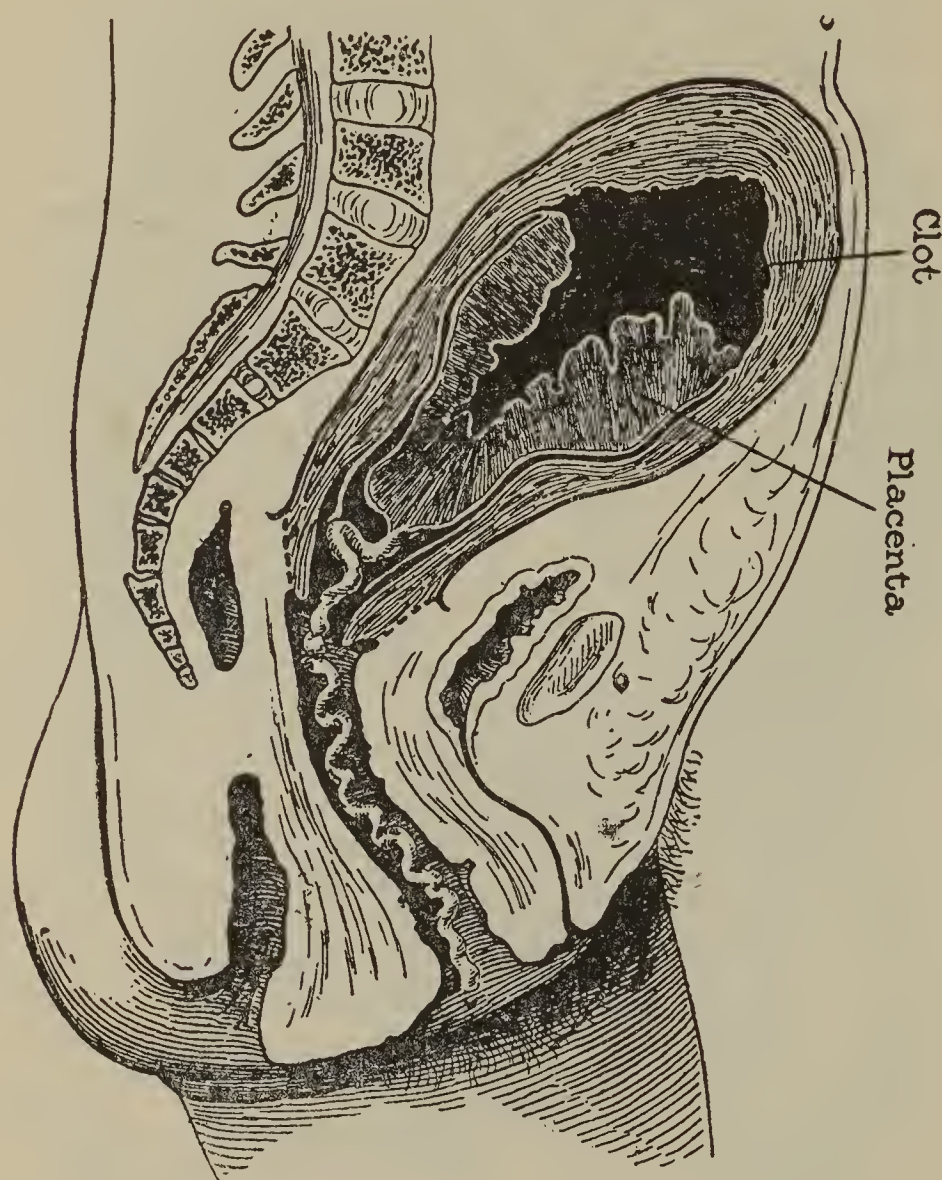
SAME WITH CHILD REMOVED, SHOWING HOW THE WOMB AND BIRTH-CANAL  
(VAGINA) ARE STRETCHED

Dropsy of the feet and legs and swollen veins are all due to the same cause—pressure above by the womb. The veins which enlarge may be in the limbs, or about the end of the bowels ("piles").

Neuralgia is common, affecting the teeth, the face, the breast, or between the ribs. Cough and difficult breathing depend

largely on the lessened motion of the muscle between the chest and the abdomen (the midriff or diaphragm).

Convulsions are the most serious condition met with in the pregnant woman, and it is sad to note that about three-quarters of all cases occur with the first child. Almost one-half of the children die, and about one-quarter of the mothers.



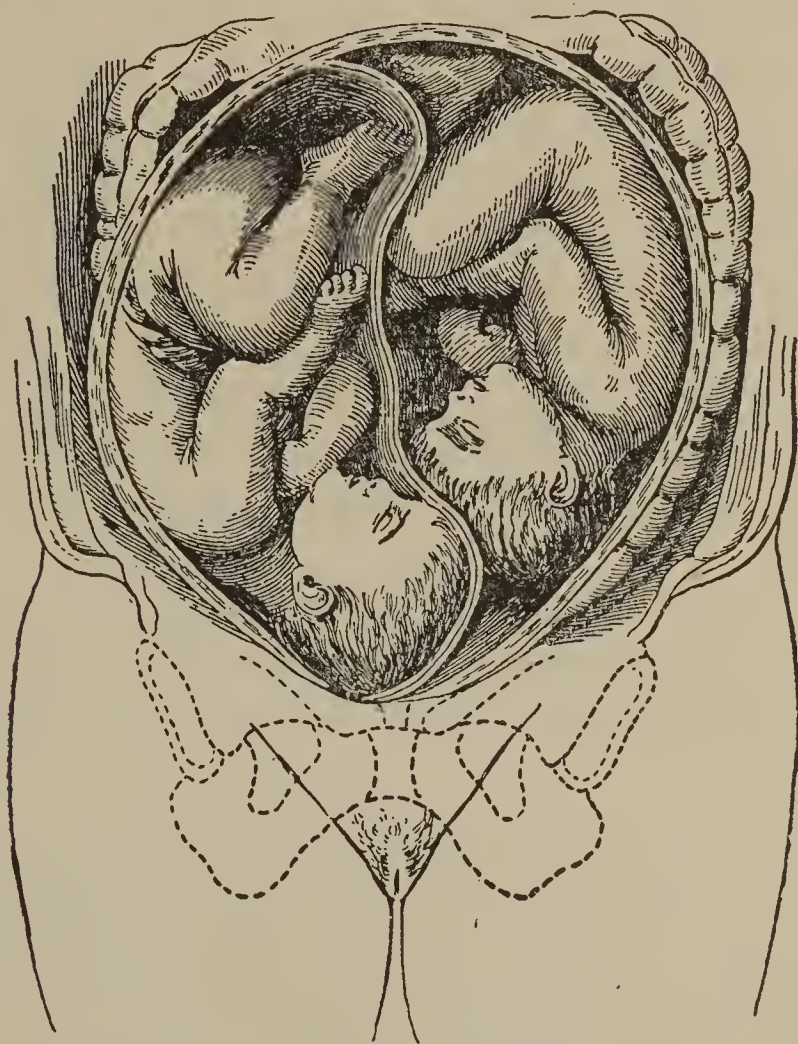
SHOWING HOW THE "AFTER-BIRTH" (PLACENTA) IS FORCED OUT BY THE "CLOT" (BLOOD) COLLECTING BEHIND. THE CURLED AFFAIR ATTACHED TO THE AFTER-BIRTH IS THE NAVEL-CORD.

#### MULTIPLE BIRTHS

Double births (twins) are somewhat common; triplets much more rare, and quadruplets excessively so. A few cases of five at a time—and apparently genuine—are known, some of them from this country. Some years back a series of 13 million births in Prussia was analyzed, and twins found once in every 80 births, triplets once in 7,910, and quadruplets once in 371,126.



There are two kinds of twins, the ordinary, which may be of the same or different sexes; and the extraordinary (homologous) invariably of the same sex. Nevertheless the sexes are pretty evenly divided, for of the twin-births in Paris during five years, 33 per cent were boys, 32 per cent girls, and 35 per cent of both sexes.



TWIN BABIES, SHOWING THE POSITION IN WHICH THEY USUALLY LIE

#### OUTFIT FOR CHILD-BIRTH

Complete outfits ready for use may be had from the surgical-supply houses, and if due time be allowed for shipping, could be ordered through the druggist; the prices range from a small sum up to \$50. If for any reason it is thought best to gather the materials needed at home, the following list of suggestions may be useful. It can be materially extended as necessary, and each medical attendant has his or her ideas of what is essential:

The bed linen and towels need not be new, if well washed and thoroughly sterilized, not by warming but by *baking in the hot oven for several hours*. They should first of all been encased in several layers of clean wrapping paper and not taken out of

the wrapper after baking till ready for use. If possible they should be removed from the oven directly to the lying-in chamber.

For keeping the bed dry, two waterproof sheets are absolutely necessary—one about 6 by 4½ feet, the other 3 feet square. Formerly rubber was the favorite, but the cost is now so great, table oilcloth, preferably white in color, may be selected.

Several utensils of enamel or agate-ware, a couple of slop-jars, as many washbasins, a douche-pan, a 2-quart pitcher.

Several (new) nailbrushes, a fountain syringe (if well boiled, an old one will suffice), a hot-water bag or bottle, a medicine glass, castile soap, green (liquid) soap, white vaseline.

Six yards or so of cheesecloth (baked), plenty of absorbent cotton (baked).

It is taken for granted a fresh nightgown and stockings are in readiness, and the usual baby clothes. Some doctors advise the use of “binders” for the mother’s abdomen, after delivery; others object to them.

The physician is provided with any drugs he thinks will be called for, also chloroform, and braided silk for tying the navel-cord. For this last purpose little clips are often applied.

#### MATERNAL IMPRESSIONS

No doubt a great many of our readers have seen individuals whose faces are disfigured by large bluish or purplish blotches, popularly termed “mother’s marks.” They may also be found almost everywhere on the skin surface, but are obviously most noticeable on the face. These are said to be due to some “longing” of the mother while carrying the child, and which was not gratified; or else they follow some scare or fright. It makes no difference what the longing was for, articles of food, drink, ornament, etc., the grandmothers or some wise neighbor can glibly point out the resemblance in shape and color to the object longed for.

This, of course, is ridiculous. Such marks are due to unusual width of the blood-vessels under the skin, and quickly relieved by electricity, the X-rays, or that recent wonder-worker—radium. We have not heard so far of any “longing” for an automobile being recorded by one of these mother’s marks; to have a “flivver” or any other of the popular makes indelibly imprinted on the offspring would be very annoying.



For an early example of this belief we must turn to Holy Writ (Genesis xxx, 37, 38, 39) :

“And Jacob took him rods of green poplar, and of the hazel and chestnut tree; and pilled white streaks in them, and made the white appear which was in the rods.

And he set the rods which he had pilled before the flocks in the gutters in the watering troughs when the flocks came to drink, that they should conceive when they came to drink.

And the flocks conceived before the rods, and brought forth cattle ringstreaked, speckled and spotted.”

After impregnation occurs and the baby begins to develop in the womb, it has no connection with the nerves of the mother, depending on her only for nourishment. There being no nervous communication any mental shock sustained by the mother could not be transmitted. Thus in the old story of the white woman who gave birth to a mulatto, and accounted for it by telling her physician she was “chased by a negro” the doctor added—under his breath—“and *caught* by one.”

It is true that when the mother does not get sufficient food while carrying the baby, or is suffering from some slow poison, let us say alcohol or lead, the child may be deformed but only because it is not well nourished.

In “Sir Richard Calmady,” a story by an English lady-novelist, the daughter of a clergyman, the hero’s father was a great fox-hunter, and as the result of an accident was brought home with both legs off. The mother, pregnant at the time with the hero, saw the father as he was being carried in, and when her son was born, he, too, was deprived of legs.

Preposterous! It occasionally happens that children are born with one or both legs, one or both arms (or all four limbs) missing, but this unfortunate happening is generally due to the coverings of the child in the womb being too tight in the early stage, and thus cut off the blood supply to the extremities. In very rare instances there is nothing developed but the head itself, trunk and lower limbs being represented merely by a flattened area of a sort of thin skin. Our own Oliver Wendell Holmes, and himself a physician, in his novel describes a case in which the mother of the heroine was frightened by a snake, and the girl grew up with all sorts of serpent-like traits. Though there is



some excuse for this, because at the time his tale was completed not so much was known of the subject.

By the end of the second month the development of the child is completed, after that it merely increases in size. When there is any deformity it must be regarded only as a coincidence. Nearly all mothers have some fright, scare, or other violent mental shock while carrying the child or children, yet how few have "marks." How shall we account for such cases as the one reported from Europe several years ago, in which the father and all four children had club feet? Was the mother "scared" four times in succession by seeing her husband or some other individual with club feet? We thoroughly agree with Herbert, the English authority, who states: "Only the striking coincidences, of course, are noticed, while the failures are forgotten."

The lower animals, birds, reptiles, even fish, are also subject to such deformities, in fact, some types, such as double-heads, are much more common in them. We might admit that animals may have had some "longing" but it would be stretching one's imagination too much to grant this in case of a bird, and especially of fish, which, as we have seen, are left to the chances of wind and wave to grow up.

We shall close the discussion of this part of the subject by recalling another story of the woman whose family were notoriously slow in paying for medical help. Her doctor who had not been remunerated for the previous arrival, was pestered during the birth as to whether the baby would be "marked." Finally, after it was born, getting out of patience, he inspected the new arrival very carefully, then looking over his glasses, he turned to the mother and said: "I am sorry to say, Madame, the baby is marked—C. O. D."

## CHAPTER XVIII

### ABORTION \*

OF course as to the graver question of abortion, or feticide, there can be no serious conflict of moral judgment; although the frequency with which the crime is committed, in these later days, is sufficient evidence that Civilization itself, if it teaches, fails absolutely to guard, the sanctity of human life; and that there is no power in education, law, refinement, nor any other influence, save that possibly of religion, to repress savage and utilitarian instincts, and subordinate them to the best uses of society. Indeed, there appears to be a growing sentiment, born chiefly of the crime, degradation and suffering of the very poor, with a too slavish regard for the not clearly defined, and very much overrated, law of human heredity, which teaches that the prevention of birth is, in many cases at least, an act of mercy. One of the greatest minds of Greece not only condoned the practice, but advocated its adoption by law, when the population had exceeded certain defined limits; and the laws of Rome, during the Republic and the greater part of the Empire, so far as I am enabled to ascertain, nowhere condemned it.

A great army of writers, both Pagan and Christian, represent the practice as both deliberate and universal; ascribing it, not to poverty, not to licentiousness in sexual indulgence, but to the very same motives which underlie it today—the shrinking of the fashionable mother from the pains and necessary disfigurements of child-bearing, the difficulty of discharging social duties, and a selfish desire to avoid parental cares and responsibilities.

Weighty motives, truly, to lie at the root of murder! It speaks well for the poets and philosophers of Rome and Greece, that, while Ovid, Seneca, Favorinus, Plutarch and Juvenal, all regarded abortion as notorious and common, they were equally unanimous in pronouncing it reprehensible and criminal.

Probably the most active agent in promoting the wicked practices of abortion and infanticide in the United States, as well as England, is the obloquy, notwithstanding the sexual excesses of

---

\* Dr. J. Richardson Parke in *Human Sexuality*.

both countries, which attaches to such violations of the laws of chastity on the woman's part. It is no crime on the part of a man to commit adultery, to seduce a virgin, or keep a mistress, so long as the act is shrouded with a becoming secrecy; if found out, it may be mildly disapproved of, but woe betide the woman who makes a misstep!

Acts, which, in France, Italy, Russia, or other portions of the continent, would imply neither total subversion of the moral sense, nor any general emotion of deep popular reprehension, are, in England and the United States, followed in a great majority of cases by social ruin. Thus, in the endeavor to hide sins which in themselves ought neither to be hopelessly vicious, nor irrevocably fatal, being simply the temporary triumph of man's temptation, and a natural instinct on the woman's part, over social convention, infanticide and abortion are multiplied, and thousands and thousands of pure-minded, yes! easily savable young girls, are hurled annually into the abyss of prostitution.

Indeed it would not be hard to show that it is by no means the naturally worst female element which falls before temptation; this ruin, in most cases, being quite as much due *to ardor of affection*, vivacity of mind, as to inherent vicious propensities.

The question of the criminality of abortion has also been largely affected by the diverse views, and physiological speculations, of medical writers themselves, as to the precise period in intrauterine existence at which the fetus takes on the nature, and consequently the rights, of a *separate being*.

The ancient idea was the child was a part of the mother; and that she had the same right to destroy it as to amputate a finger or excise a tumor from her body.

Both Plato and Aristotle admitted, and even sanctioned, the practice of abortion, no enactment against voluntary feticide prior, at least, to the time of Ulpian.

The Stoic philosophers believed that the soul of the infant was received with its first respiration; and the Justinian Code fixed, arbitrarily, the period of the beginning of animation forty days after conception; while the more rational modern doctrine, of course, is that the infant is a distinct living organism from the very moment the ovum is fecundated.

Abortion is justifiable in those cases where continuation of



the pregnancy to full-term would be associated with fatality to either mother or child, or to both; where the habitual death of the fetus, *in utero*, has accompanied a great number of previous pregnancies; in multiple pregnancies, where the growth of two or more offspring in the womb would gravely threaten the mother's existence; in certain diseased conditions—abdominal dropsy, tumors, pernicious anemia, predisposition to placental hemorrhage, chorea, nephritis—and those anatomical malformations of the bony pelvis which render parturition not only dangerous, but, in many instances, impossible.

Stehberger and other obstetricians would add to this list cases where the mother's life is despaired of, but in which premature delivery may save the child's life; but whether deliberate abortion may be resorted to as *a means of averting shame*, on the part of the mother, or safeguarding her *social character and standing*, is a question which belongs to Morals rather than Medicine, and concerning which the maternal instinct, as well as the intuitive perceptions of morality, may always be relied on to form a correct judgment.

With an almost countless army of prostitutes in this country, with luxury and idleness among the rich constantly tending to sexual erotism and sensuality, with the free and easy social intercourse prevailing between the sexes, with the constantly diminishing number of marriages, and that monstrous aversion to motherhood, when marriage does take place, so universally prevalent among women, it can hardly be wondered at that abortion has become so frequent as to attract the gravest attention of the law it seems so easy for it to evade; or that infanticide is growing so common as to recall the Roman horrors of the thirteenth century, when, it is said, Pope Innocent III was shocked at hearing that dead infants were being drawn nightly from the Tiber in the nets of the fishermen.

In the first place, there is no room for any diversity of view as to abortion outside the exceptions I have named. It is simply the most *cowardly and brutal form of murder, committed for the most selfish of motives*. There should be no hesitancy at least on that point. I wish I could say to those young girls who prowl nightly through the streets, inquiring, with veiled faces, at drug-shop counters for abortefacient remedies, or for those cold-blooded

charlatans, those night-hawk Borgias of unborn innocence (not always, alas, belonging to the illiterate laity, nor to even the known "scalawags" of the profession), who, for a week's wage of an ordinary mechanic, hire themselves to perpetrate a crime *meaner, more cowardly* than open, manly homicide; I wish I could say to these, many of them innocent victims of man's perfidy, that, as far as moral guilt is concerned, they might just as well take the rosy, smiling babe from the cradle, and strangle it, as to swallow the potion that stills forever the tiny heart they can feel beating beneath their own.

Let the young mother—married or single—keep this thought constantly in her mind if she would avoid Divine vengeance; for, they were no idle words which came to that little circle of listeners by the Sea of Galilee—"whoso shall offend" [attack, assail, hurt or injure] "one of these little ones, it were better for him that a millstone were hanged about his neck, and that he were drowned in the depth of the sea."

The moral unity of any community is not one of standard, nor of acts, but of *tendency*. Men are born with benevolent feelings very subordinate to selfish ones; and fortunately so, as a little thought will convince us that the extinction of selfishness—and this is a hard blow to the altruist—would necessarily result in the complete dissolution of Society; but it is the function of civilization, and of religion, partially to invert this order; or at least to restrain congenital tendencies within prescribed limits. Special circumstances may influence the intermingling of complicated motives; may temporarily obscure or retard moral evolution; but back of all the conflicts of theological dogma, independent of all material or psychical processes, is a well-defined ethical idea of *right* and *wrong*, which resists every counter-stroke of philosophy, and the most obtrusive element of which is the inviolable *sanctity of human life*.

The man who destroys life, at whatever period, save in defending his own, or in obedience to the behest of law, is a *murderer*; and I make the assertion, and devote so much space to the matter, simply because men and women are trying on every side to stifle their innate instincts, and to reason themselves into the false and foolish belief that destroying a fetal life is a very different thing from destroying that of an infant after birth, or that of an adult. Both acts, so far as moral guilt is concerned,

are, on the contrary, *precisely alike*. So much alike, indeed, that post-natal infanticide, coming directly within the juridical category of murder, I shall omit largely in this connection, the arguments used applying equally to both intra- and extrauterine murder.

One of the first needs of a licentious act is, of course, to conceal its consequences. Many of the reasons given by married women for procuring abortion would have some weight were they not preventable. Thus, a woman with an abnormally small pelvis may very justly dread the ordeal of childbirth; but such a woman *never should have married*. The same remedy applies if she have an incurable disease; and in almost, if not all, such cases it will be found that the first sin lay in exposing herself to a condition in which the secondary one became necessary. Of course many will say that this is a hard remedy—to abstain *forever* from sexual pleasure. It is; but the condition necessitating it is also hard.

Dr. Reamy, of the Ohio State Medical Society, writes—“From a very large verbal and written correspondence in this and other States, together with personal investigation, and facts accumulated, it appears to me *we have become a nation of murderers*.” This startling statement, founded on most undeniable facts, has reference to the widespread, and apparently increasing, habit of committing abortion, or feticide, which is, to all intents and purposes, *premeditated murder*.

That forced abortion is steadily on the increase, and that prevention of conception keeps pace with it, is proven by the fact that our native-born Americans, among whom the terrible practice appears most prevalent, are all noted for *small families*, and that among this class, as is amply shown by statistics, there are absolutely in many places more deaths than births, the native-born population of Massachusetts and New York *actually decreasing* every year. A clergyman of New York writes—“We could prove that in our little village of a thousand people prominent women have been guilty of this crime of murder. Sadder still, half of them are members of Christ’s Church; and while fully 15 per cent of our women habitually practice this deadly sin, there is a much larger percentage who endorse and defend it.” Few of either sex nowadays enter into the marriage relation without being fully informed of every method and means of obviating the undesirable results of matrimony; and it is no



uncommon thing to find women making these the subject of social afternoon conversations among themselves.

Common charity prompts the belief that such women cannot *know* the awful enormity of the crime they commit. It is to be hoped, at least, that they may have that shield of ignorance to cover themselves with in the Last Day; but in order to convince such that they cannot hide behind any silly notion that the killing of the fetus in the womb is a whit different from killing the child in the cradle.

#### ABORTION AND ITS RESULTS

Few but medical men are aware of the enormous proportions which have been assumed by this terrible crime during the present century, that it is increasing with fearful rapidity, and has really reached such a magnitude as seriously to affect the growth of civilized nations, and to threaten their very existence, has become a patent fact to observing physicians.

An eminent medical authority asserts "that the frequency of this form of destroying human life exceeds all others by at least 50 per cent, and that not more than one in a thousand of the guilty parties receive any punishment by the hand of civil law. But there is a surer mode of punishment for the guilty mothers in the self-executing laws of Nature.

The destruction of the child after the mother has felt its movements is termed infanticide; before that time it is commonly known as abortion. It is a modern notion that the child possesses no soul or individual life until the period of quickening, which occurs at about the third month. This is an error undoubtedly. The ancients with just as much reason, contended that no distinct life was present until after birth. Hence it was that they could practice, without scruple, the crime of infanticide to prevent too great increase in population. The bad effect of abortion and infanticide are not felt upon the child only, as some may suppose, but as I have already pointed out, the mother is in imminent peril of losing her life at the time, and it is also possible that she may be rendered an invalid for the rest of her days. A physician states that it is *fifteen* times as dangerous as natural childbirth. Says another author writing on this subject: "There are those who would fain make light of this crime by attempting to convince themselves and others that a child while in embryo has only

a vegetative life not yet endowed with thought and ability to maintain an independent existence. If such monstrous philosophy as this presents any justification for such an act, then the killing of a newly-born infant, or of an idiot may be likewise justified. The destruction of the life of an unborn human being, for the reason that it is small, feeble and innocently helpless, rather aggravates than palliates the crime. Every act of this kind, with its justification, is obviously akin to that savage philosophy which accounts it a matter of no moment, or rather a duty to destroy feeble infants, of old helpless fathers and mothers."

Let us look at some of the effects of forced abortions on the body and soul of the mother:

In producing abortion at *any* period of gestation she runs a great risk of losing her life; death may occur from flooding or subsequent inflammation. Very many women die from this cause, whose acquaintances and even near friends never know the true origin. It is difficult to get at a nearly right proportion of deaths, but it may be safely stated that one woman in every ten who effect forced abortions die—either at the time from hemorrhage, or shortly after through inflammation, etc.

It is a mistake to suppose that death must be immediate, and owing only to the causes just mentioned. The rapidity of death, even when directly the consequence, greatly varies; though generally taking place almost at once if there be hemorrhage, it may be delayed even for hours where there has been great laceration of the uterus, its surrounding tissues, and even of the intestines; if metro-peritonitis ensue, the patient may survive for from one to four days—even, indeed, to seven and ten. But there are other fatal cases, where on autopsy there is revealed no appreciable lesion, death, the penalty of unwarrantable interfering with Nature, being occasioned by syncope, by excess of pain, or by moral shock from the thought of the crime.

A score of natural births at the full period, under right conditions, would not entail on the mother a shadow of as much pain and danger as would one forced abortion.

Allowing the woman has been so fortunate as to escape death, there follows in the wake of the crime done such an array of evil results as might well deter any woman from the commission of this great crime. Diseases of the pelvis—such as vesical and uterine fistula, adhesions of the os or vagina, etc., all of

which are often incurable; uterine displacements, and all their attendant miseries. Sterility sooner or later results, so that when the woman really desires offspring, her desires and prayers bring no echoing response. Should the woman succeed in bearing children, they will likely be puny, unhealthy, deformed and short-lived.

If there is one thing more than another that will destroy beauty it is the one of criminal abortion. Abortion will very effectually and very quickly destroy the most beautiful face and form a lovely woman ever was endowed with, and hurry her with rapid strides to premature age, with its attendant faded skin, wrinkled face and bent form. The woman who produces abortion destroys the bloom of her ripe womanhood, hardens and deepens the face-lines, angularizes the hitherto rounded contours, the outward loving expression of the soul's interior presence is darkened, the rich maternal love-nature is lost, and premature old age comes on with galloping strides.

When the "turn of life" arrives, there is often present a tendency to that fatal disease, cancer.

And lastly, there is the ever-present remorse of conscience—the ever-present phantom of a great crime—a crime against humanity—a crime against the loving mercy and justice of God, ever asserting the individuality of its thought-nature, ever destroying all peace and happiness of the perpetrator. And well it may; for if murder will not do it, and especially the murder of one's own child, what will do it?—what can do it?

While illegitimate sexual indulgence doubtless leads to abortion in no small degree, yet it is safe to say that it is practiced within the home circle to a greater extent than anywhere else. It is needless to say that any interference with the course of Nature is essentially harmful, especially to the mother. As far as health is concerned, the burden of ill-health resulting from the perversion of Nature's laws falling entirely on the woman.

The risks and dangers attendant upon abortion are very great indeed, especially after the first month, the danger increasing as pregnancy progresses. As has been shown above, the uterus undergoes a slow and gradual change for the reception of the fetus and for its delivery at the end of nine months, and when forced to do this work prematurely it is unprepared, and the uterus is unable to contract sufficiently completely to expel



the contents. This causes a wide range of disorders, such as subinvolution, displacements of the uterus, leucorrhea, hemorrhages, etc. In fact, a woman very rarely escapes serious consequences.

After one abortion has taken place the diseased condition of the reproductive organs often renders the woman barren for life. The consideration of the future welfare and happiness of their children should be a matter of greatest importance to every parent. The home life should be so regulated as to make it a fit place for their growth and education, and not until there is a proper conception of the duties of parentage will there be an improvement in the situation. The mother is the type of the highest expression of Nature, and her creation crowned the animal kingdom. The millions of humanity who have been sent on this earth to work out our civilization all sprang from one original cell measuring one one hundred and twentieth of an inch in size! The name of "mother" is sacred the world over, and the tie that binds her to her child is usually more intimate and lasting than the affection she feels for the father. The mating of the two sexes is consummated in the sexual act, and the result is the child that binds them together. We owe it as a sacred duty to posterity and to ourselves that greater care should be taken in the propagation of the race; that our children be reared and nurtured in hygienic surroundings, and that the environment of the home life shall be such as to wield a powerful influence for good upon each and every member of the household. The highest function of true manhood is to protect the woman he loves and uphold her during the years in which she is devoting her mind and heart to the rearing of their children. He plays the aggressive part, and his very approach to the woman is a pledge of his guardianship and protection to her.

Abortion as it is commonly practiced today is a crime against the Law of God and Man.

#### THE QUESTION OF ABORTION \*

A clever word has recently been coined by Prof. Gumplovicz of the University of Gratz. The word is "acrochronism," and it refers to the belief which is shared by the majority of people, that

---

\*An address delivered by Dr. Wm. J. Robinson before a body of physicians and later published in *Sexual Problems of To-Day*, The Critic and Guide Co., New York City. (See Adv. Last Page.)

the period they live in is the best of all periods, superior to any period that has preceded it.

And right here let me say that I believe, in spite of the fact that humanity is not advancing in a straight line, but in zigzag; in spite of the fact that occasionally we take a decided step backward; in spite of the fact that some periods are poorer in great men, in philosophers, in writers, than some preceding periods, I believe, I say, that, with the exception of the dark Middle Ages, which for a thousand years hung like a pall over the world, acrochronism is justifiable, and I am willing to be classed among the acrochronists. For we *are* making progress, and if we make up the balance sheet at the end of every ten or twenty-five years, we shall find the sum total decidedly in our favor.

We have not yet solved all the questions in philosophy, in morals, in religion, in economics that confront us. Regarding some of the questions, we are no nearer solution than we were a century ago; but one point we have reached: we are no longer *afraid* to discuss *any* question. There are no sacred subjects any more, the mere discussion of which is considered a crime. We have passed the childish stage in which we were told that certain questions must not be touched, that it was a sin to think of certain things or try to analyze them to find out the why and wherefore. We recognize no barrier to any discussion. We recognize no closed doors which we must not attempt to open with the key of critical analysis. In short, in the arena of discussion we recognize no forbidden ground. We recognize but one danger—the danger of silence, the danger of repression. No matter how wrongly a question may be discussed, it is by far better to consider it openly, even if erroneously, than not to discuss it at all. If we discuss a question wrongly, someone is sure to point out our error, but if for fear of appearing unconventional, of being criticized by Mrs. Grundy, we hide our opinions, smother our convictions, how can we ever arrive at the truth?

The question of abortion is of great interest from a philosophic, biologic, moral, and social standpoint. Unfortunately it has always been surrounded with so much bigotry, so much hypocritical cant, that the issue has been entirely obscured.

There is no reason why this question could not be discussed calmly, judicially, without bias and without fear. This I will attempt to do.

And I can do this the more readily, because, strange as this statement may sound to you, I personally have never produced an abortion. Yes, it is twenty years since I received my M. D. degree, and during that time I have not committed one single abortion. I know this sounds strange in a large audience of physicians, but it is so.

But, pray do not for one moment imagine that it was on moral grounds that I refused the hundreds of pleading, weeping, heartbroken, distracted women, married and unmarried, who begged and entreated to be freed of the fruit of their womb. No! I repeat, it was not moral superiority; it was pure cowardice, principally. I may have contempt for a law, but I prefer to obey it as a matter of wisdom—as a matter of egotism, if you will. I have always felt that I have something important to do in this world; I felt that I had a message for humanity, and I therefore thought it best not to endanger my peace of mind and not to run the risk of getting into the clutches of the law. Yet there is no particular merit in such an attitude. It is a policy of wisdom, but it has nothing to do, I wish to emphasize, with high moral courage.

Another reason for my keeping shy of abortions is that it is hard to shake off the feelings of prejudices engendered by early training; and I have always had a personal dislike for the abortion business; and I have always been taught as a youth to despise the abortionist. And the professional abortionist, it must be confessed, is not a high-class individual. True, he may prove, and often does prove, a great benefactor, but the fact must be borne in mind that the professional abortionist is not in the business for altruistic purposes; he does not do the work out of pity's sake, as physicians sometimes do; he does it only for the money. If you don't believe it, ask a professional abortionist to bring on an abortion on a poor girl, without charge.

So you see what my personal views are. But I have always had deep contempt for the hypocrite, and likewise great pity for the muddle-minds who would get up in a medical society and brand the commission of an abortion as a crime exactly equivalent to that of murder, and would, with eyes raised to heaven, stigmatize the one guilty of an abortion, whether it be the aborter or abortee, as a murderer.

Gentlemen, if every physician who even once in his career—



under the stress of tragic circumstances, in order to save the life and reputation of a young girl and the happiness of her parents—performed an abortion, is a murderer, then seventy-five per cent, nay, probably ninety per cent of the medical profession are murderers. *And if every woman who had an abortion performed on her is a murderess, then millions of our child-bearing women are murderesses.* And I tell you that some of them are beautiful murderesses, sweet, gentle, kind, attached to their husbands and children, devoted to charitable work, and altogether lovable. A peculiar kind of murderess.

Should any of my utterances appear to you too radical, should any of my friends think that some of the things I say might better be left unsaid, then I can only reply, paraphrasing slightly the young genius, the lamented author of "The Martyrdom of Man": In the matter of speaking or writing I listen to no remonstrance, I acknowledge no advice, no decision save that of the monitor within me. My conscience is my adviser, my audience, and my judge. It bids me write and speak as I write and speak, without evasion, without disguise; it bids me go on as I have begun, whatever the result may be. If my opinions should be condemned, without a single exception, by every one in the audience here, it will not make me regret having expressed them, and it will not prevent me from expressing them again.

That the question of abortion is of tremendous importance will be acknowledged by everybody who has given the subject any consideration.

The number of abortions performed annually in this country is so appallingly large that the uninitiated cannot be blamed for being somewhat skeptical when the figures are mentioned. I have gone on record with the statement that about a million abortions are brought about every year in the United States. Exact statistics are not and never will be available; but I am sure that my estimate is a very conservative one, and that three millions would be nearer the truth. Justice John Proctor Clark stated that one hundred thousand abortions are performed annually in New York City alone, and if these figures are correct, then the number for the United States would be in the neighborhood of two and a half millions.

Can you form any conception in your minds as to what this means, in shame, in humiliation, in anguish, in economic loss, in

time and money, in chronic invalidism, in permanent sterility, and in premature graves? No, I fear you can not. And the worst of it is, that abortion and the demands for abortion are not diminishing but increasing from year to year, as can be testified to by all general practitioners. And as far as the immediate future is concerned, the evil is sure to keep on the increase.

The reason for this is a two-fold one: First, married women are beginning to rebel against an unlimited number of children, they are beginning to refuse to be drudges, good for nothing except breeding and nursing; they are beginning to feel the tremendous responsibility of bringing children into the world for whom they cannot provide, and having failed, on account of ignorance, in preventing pregnancy, they will try to interrupt it. No physician in this room will deny that the demand from married women for bringing on abortions is becoming greater from year to year.

The second reason is that our unmarried women are beginning to look at sexual relations from a different point of view. Of course I do not speak of all women, but I speak of a large, constantly growing number of educated, thinking, independent women.

These women—it is shocking, but it is true—do not regard chastity as the greatest treasure of woman, or the greatest honor of woman. They are not like the ancient Roman or Jewish women, who were always ready to give up their lives for their honor. No! Many of our women of today regard chastity as but an empty virtue, a hollow shell. They have been taught the injustice of a double standard of morality. If a woman can remain chaste until marriage they have been told, so can a man. But as they saw that men do not remain chaste, they decided that they themselves need not do so either. In other words, they turned the proverb around, and declared that what was sauce for the gander was also sauce for the goose.

And there is no use denying that there is a constantly growing number of unmarried women who indulge in sexual intercourse habitually, without considering it any more wrong than do men. And, of course, when these self-same women get into trouble, they will demand relief. And you cannot blame them. As long as illegitimate pregnancy is considered the blackest of crimes, as long as maternity unhallowed by priest or magistrate

is considered the deepest and most shameful sin of which woman is capable, so long you can not blame the unmarried woman for wanting and demanding to get rid of the fruit of her passion, of the evidence of her "sin."

These women are not low and debauched, as our puritans and theologians would have us believe. They would prefer to get married, to live like true, faithful wives, for unlike men, who by nature are polygamous, women are by nature monandrous. But on account of social-economic conditions, marriage is all the time becoming a harder and harder proposition; it is becoming more and more difficult to make a career, and therefore the age at which men get married is getting further and further advanced; many never arrive, while others, when they are ready financially, find themselves so old that they decide to end their lives in single blessedness. Many old bachelors means many old maids. The old bachelors have no difficulty in satisfying their sexual needs.

What should the old maids, or the relatively young but prospective old maids do? Remain old maids, crabbed, soured old maids to their last day? Well, thousands and thousands are doing it. Thousands and thousands of women are ruining their health, destroying their beauty, stifling their desires, renouncing the greatest joy and pleasure of life, the companionship and embraces of the opposite sex, are bringing all these sacrifices for the sake of a principle which is very dear and very real to them, though others consider it but an empty bubble. But those women who have thrown off the restraint of religion and are not hampered in their acts, by what is to them a fictitious morality, are not willing to sacrifice their lives to a myth, to a symbol, and with these women, unless, as I said before, they acquire the knowledge of the prevention of conception, the medical profession will have to count.

Some of our esteemed friends have an infallible remedy for all this world's ills.

Teach the people morals or religion (which terms to them are, by the way, synonymous), they tell us, and all will be well. "Teach the people that abortion is a crime equivalent to murder, that the mother who has an abortion performed on her is a common murderess. Excoriate the abortionist in the press and in the pulpit—and the evil will disappear."



How naïve, how childish, or shall we use a stronger word and say, how stupid? *Here they have been teaching, preaching, cursing and excoriating for two thousand years; yet the evil, instead of diminishing, is increasing.* And still they have not the perspicacity to see that the remedy they propose is an ineffective one.

The same thing with the prevention of venereal disease. We all know the terrible ravages of venereal disease. We see the incalculable damage it is doing to the individual, to the family, to posterity. But when it comes to remedies we differ. Our conservative friends who have not succeeded in freeing themselves from the thralldom of custom, tradition and superstition have but one remedy to offer: Preach morality, preach chastity, frighten the people with the specter of syphilis and gonorrhea. That this preaching and frightening process has been going on for two thousand years without any effect whatever seems to have no influence on them. They keep on repeating the same vapid, though undoubtedly in most instances sincere, platitudes, year in and year out.

We, radical thinkers, who are not afraid to look at every question from a broad philosophical viewpoint, who combine with our idealism and hope for the future a desire for practical results in the present, have seen the inefficiency of moralistic preaching, and have decided that if we wish to diminish venereal disease under our present social conditions, the only thing to do is to show the people how to use real preventive measures. And where preaching and cursing have proved worthless, protargol and calomel have shown themselves marvelously effective. Our Government puts these preventives into the hands of our soldiers and sailors, and everywhere there is a marked diminution in the incidence of gonorrhea and syphilis. And we cannot see why the means that are used with such good effect by the army and navy, by the student bodies of Germany and France, cannot be put into the hands of the general public with similarly good results.

To return to the abortion question, which presents a similar aspect. Recognizing abortion as an evil, and recognizing that the most thunderous anathemas of the church, the most horrible threats of eternal punishment have failed to do any perceptible good, we turned to more practical, more efficient measures.

There is one measure, and one only, which will quickly and positively do away with the evil of abortion, and that is, teaching the people how to prevent conception. This is but one of the evils which the knowledge of the prevention of conception will do away with, but it is an important evil. Of course our so-called moralists and thinkers who belong to the kindergarten class object to this—but this we cannot help. We shall have to accept their opprobrious epithets, face their displeasure, and go on with our work. And our motto will remain: No undesirable pregnancies, no forced childbearing, no children brought into the world as accidents.

We now come to the other part of the paper: Is abortion ever justifiable? Particularly, is abortion ever justifiable when the mother's health is not threatened?

There is a religion which considers abortion unjustifiable, under any and all circumstances; even when the mother's life is at stake; even when the mother is sure to lose her life, unless abortion be induced. These views are to us so medieval, so inhuman, that we cannot discuss them. We can only condemn them as unworthy of an enlightened humanity. The more liberal religions and the vast majority of the public in general recognize that abortion is justifiable whenever the mother's *life* is threatened, and our textbooks on obstetrics give a number of indications where the physician is justified in inducing abortion. Such are: Uncontrollable, pernicious vomiting of pregnancy, severe albuminuria, tendency to eclampsia, puerperal insanity in previous labors, deformed pelves, certain cases of heart disease, tuberculosis, and a few other conditions.

Let us now see whether abortion is ever justified when the mother's health or life is not at all threatened. To make an argument carry conviction, to make it strike the nail on the head, it is a good thing, at least it is often necessary, to take a striking illustration. Let us take the following example:

A beautiful girl, of a fine family, barely 16 (and, by the way, this is an actual- and not a hypothetical case), is assaulted and raped by a brutal negro. To the indescribable horror of the girl and of the parents, her menses fail to appear at the expected time, and the horrible fear of pregnancy becomes a certainty, corroborated by a physician, in another month. The girl's health,

however, strange to say, has not suffered in the least. Nature, as you know, does not know the words licit and illicit.

Now I am asking you this clearcut, unequivocal question, to which I would like to have a clearcut, unequivocal answer: Is abortion permissible in that girl's case? If you answer unequivocally, without beating about the bush, without any hesitation, as one Catholic priest did, "No!" I am satisfied. I simply stop all further discussion because I can see that we live in different centuries, different blood courses in our veins, different feelings dwell in our hearts, radically different thoughts are produced by our cerebral cells. You would no more understand me than a Hottentot would understand Shelley's poems, or a blind man appreciate Murillo's Madonna, or a deaf man be thrilled by Beethoven's symphony. But if you say, as I imagine most of you will, "Yes, in the above case abortion is justifiable," or, perhaps, "not only justifiable but imperative," then we can proceed further.

Yes, the thought is revolting to have that beautiful refined girl bear within her womb for nine months and then give birth to a child the father of whom is a brute. It is perfectly brutal and outrageous to have a girl become an unwilling mother under the circumstances. Yes, I agree with you that producing an abortion in the above case is perfectly justifiable. Nay, I am willing to go even further with you and agree that not to produce one would be a crime against the girl and against humanity.

Let us now go a step further. Let us assume a case (and this case is also an actual- and not a hypothetical one; in fact, all the examples I am citing here are actual cases from life) in which the assaulter was a white brute, not a colored one. Should the girl be compelled to bear and become the mother of the child of a man whom she detests and loathes? And what love will she be able to give the child when it is born? And what future will the child have? No, for even tho the rapist may be a white man, abortion is justifiable.

Now let us take a different case. I know of several cases of incest, where brothers were living with their sisters. I know of two cases where the sisters became pregnant. In one instance an abortion was produced; the other was permitted to go to term, and the child is now in a foundling asylum. In which case do you think was the proper course pursued? In the first one, of



course; and it is a damnable shame that abortion was not produced in the second case. The girl-mother's life is blasted forever, for she has the specter of the child in the foundling asylum before her eyes all the time; she will, of course, not be able to get married; in short, she will have to drag out a miserable existence to the end of her days. And how about the child? If he ever grows up, he is sure to be miserable, unhappy, living under constant insults and humiliation, and cursing his fate and the day he was born.

We now come to the ordinary run of cases that infest the offices of physicians and the abortionists. Cases of girls who became pregnant under the promise of marriage or who lost their reason in a moment of uncontrollable passion.

Here is the problem: What should you do with those girls who come to you with their frightened eyes swollen from sleepless nights and worry and red from weeping, with anguish engraved in every feature of their face; who trembling tell you their heart-breaking tales; who plead with you that it would kill their mother (and it sometimes does kill the mother, and the father too); who swear to you that unless you help them out they will throw themselves into the river or under an elevated or subway train, or they will take a dose of carbolic acid? (And quite often, more often than you think, they fulfill their threat.) What should we do with those unfortunate girls, whose tears are salty enough to eat thru a heart of stone, and with whom not to feel any sympathy it would be impossible, except for a man utterly devoid of any human feeling? What should we do with them? Should we, concealing our sympathy for them, politely but firmly show them the door, as I, for reasons of which I am not particularly proud, have always done, or should we help them out of their misery?

Let us see what becomes of the girls whom we, the respectable doctors, put out of our offices. Some of them get into the hands of the professional medical abortionist—they are the luckiest. For, as a rule, the doctor who makes abortion his business, nefarious as it may be, does his work carefully and aseptically.

Another portion gets into the hands of the midwives and other ignorant abortionists, male and female. Here the poor girls sometimes come out all right, sometimes they become invalids

for life. In another portion the girl goes to some home or maternity hospital, stays until the child is born, which is then given to some foundling asylum or farmed out to some poor woman, the mother paying for its board. What becomes of the child, you can imagine. How the mother feels with the knowledge of her hated or loved (which latter is still worse) child in the asylum, I also leave you to imagine.

And still another portion of these girls, ignorant of how or unable to find anyone to help them go thru the tortures and humiliations of an illegitimate pregnancy and childbirth, has recourse to one of the means mentioned before: the river, the noose, the train, or carbolic acid; sometimes it is paris-green or corrosive sublimate or the heads of matches soaked in water.

Well do I remember little Beatrice. She was twenty, but she hardly looked it. She got into trouble and she came to me. I knew her. She knew me and knew I was kind, and she hoped that I would help her out of her misery. Wasn't I kind and good? But she did not know how cruel the kind can sometimes be, how selfish the good often are. When I gently as I could, but none the less positively, refused her, I saw that had I hit her on the head with a sledge-hammer I could not have hurt her more. She looked stunned. She did not say much. She did not make any threats of suicide, she gave me one reproachful look with tear-filled eyes and left. And next morning they carried her mangled little body from under the elevated train into the hospital. She gave my name, and wanted to see me. It was hard for me to go and see her, but I could not refuse her dying wish, and came. She had sustained severe internal injuries, and one could see that she had but a few hours to live. But she was fully conscious. She asked me to hold her hand. And then she said, "Forgive me. Good-bye." And I went. But were I to live a hundred years more, I should not forget her liquid, veiled eyes. I see them now, just as if she stood before me.

I could relate many, many sad heart-breaking cases of disgrace, financial ruin, and premature death of entire families, brought about by the misstep of a young daughter, which nobody would relieve—but the paper is getting too long, and, besides, you probably are all familiar with such cases.

What is the upshot of all this? What is the underlying principle of this paper? Do I advocate abortion? No. Not a

bit of it! And I do trust that none of you will go away with that wrong impression or will attempt to misrepresent me and make me say things which I did not say.

Abortion is a disagreeable business, a nefarious business, if you wish; at least it is to me, tho I may be suffering from ancient prejudices which I cannot shake off. And it is an unhealthy, unhygienic, even dangerous business. There is always a slight element of risk connected with it. It may give rise to pathologic conditions, many women become chronic invalids, and it may cost the poor girl or woman her life.

No, I do not advocate abortion. *But I do most emphatically advocate something which will render abortions unnecessary. I advocate legalizing the teaching of the people how to prevent conception.* I advocate that this knowledge be made common property; it will then obviate the necessity for abortions, as it will obviate hundreds, and hundreds, and hundreds of other evils—as I have demonstrated, I believe conclusively, in the chapter on the Limitation of Offspring.

Once more I repeat: I do not advocate abortion—I advocate the prevention of conception. But as, when you are called to a case of typhoid fever, it is hollow mockery to tell the patient that he should have taken care of himself and prevented the attack, so when little Beatrice, or Fanny, or Jennie comes to you and tells you that her periods have not come around, that she is two weeks overdue, it is too late to add salt to her wound and tell her that she should have looked out. And in cases where a life, a reputation, the happiness of several people are at stake, we are justified, I believe, in sanctioning the induction of abortion. On the one hand we have a mass of unformed, or not fully formed, nonsentient matter, which is only potentially a human being; on the other hand we have a living, palpitating human being, we have several other human beings, who can all suffer, the parents and the brothers and the sisters, we have shame, disgrace, social ostracism, and perhaps death of one or more persons. Which shall we choose?

If it is still difficult for you to arrive at a conclusion, let me ask you this question: Suppose a young woman comes to you and tells you that unless you relieve her of her trouble she will, on leaving your office, commit suicide. Suppose you know the young woman, know her high-strung character, know her



high-mindedness and truthfulness, and know that she never utters empty words; that whenever she says something she means it. Suppose you are absolutely convinced in your mind that she will carry out her threat and within twenty-four hours she will not be among the living. What then? Are you then morally justified in inducing an abortion? If not—that is, if you answer No—then let us go further.

Why do you say that, if that woman suffers from uncontrollable vomiting or develops eclampsia, you are justified in producing an abortion? You say that her life is in danger, and you are justified in trying to save it. Isn't in the former instance the woman's life in still greater danger? I may be mistaken, but it seems to me that our ideas on the subject are rather coarse and muddled up and need a thoro overhauling.

If it is a purely physical condition that threatens the patient's health or life, such as vomiting, eclampsia, a contracted pelvis, a fibroid tumor of the uterus, rapidly developing Bright's disease or consumption, then we are justified in interfering; but if it is an indescribably horrible mental anguish, if it is the fear of shame and disgrace that we know will positively hurl the woman into the jaws of death, then we must not interfere. We must sit with our arms folded and show the dying victim the door. I may be wrong, but it does not seem right to me.

People must be taught to perceive that there are conditions of mental anguish in which are a million times worse than any physical ailment or disability can be. Worse than death itself.

I feel very deeply on the subject, for I have passed many sleepless nights in self-accusations—not for having performed abortions, but for not having performed them. I am not very successful as a sophist and I could not avoid the conclusion that I was almost as guilty of the death of little Beatrice as if I had pushed her under the wheels of the locomotive.

Permit me now to make a brief summary of what I have said, emphasizing a few points:

1. Abortion is an unpleasant business ethically, has always a slight element of risk in it, and, if improperly performed, often leaves the woman an invalid.

2. The best way, the only proper way, of dealing with abortion is to obviate the necessity for it.

3. The best way, the only proper way, of obviating the

necessity for abortion is to teach the people the proper means of preventing conception.

4. To be able to teach people the proper means of preventing conception, it is necessary to change the brutal and stupid law making the imparting of such information a crime punishable by five years in prison and five thousand dollars fine.

5. To call a physician who, under certain special circumstances found himself obliged to induce an abortion, a murderer, to call every woman who has undergone an abortion a murderess, is silly and hypocritical; and those who apply these terms generally know that it is so.

6. I should like to see the term "criminal abortion" applied with more discrimination than it is now. I know that the induction of abortion is legally a crime, but that does not mean that it is always morally a crime, just as there are many actions which are not at all punishable by law, but are nevertheless the blackest of crimes from a moral point of view.

7. As long as our social system remains as it is at present, as long as marriage remains an unattainable ideal for many women, as long as the vast majority of people remain ignorant of any means of preventing conception, as long as illegitimate motherhood is the greatest disgrace for the mother and illegitimate childhood the direst calamity for the child, so long there will be a tremendous demand for abortions, and so long will the demand be satisfied. If not by those in the profession, it will be satisfied by those out of it—and satisfied in a bungled, sometimes dangerous manner.

8. We can hardly escape the conclusion that under the conditions enumerated in the preceding paragraph the induction of abortion is often morally justifiable, and sometimes morally imperative.

9. It is a very serious question with me whether the physician who under certain circumstances induces an abortion is not morally a better man than he who closes his ears, his eyes and his heart to the tearful pleadings of these most unfortunate victims of our false social system and false morality, and tells them either gently or roughly to get out of his office, and not dare to insult him with the proposal to commit a crime.

10. Under the conditions enumerated in paragraph 7, the abortionist is a necessary evil. And while I heartily approve

of the activity of our medical societies in prosecuting unlicensed practitioners and quacks, I have no sympathy with the work of spying upon and hunting down and prosecuting the abortionists. Our societies could have their time employed to better advantage. I may find very few people to agree with me on this point, but it is my opinion, and I must express it, for I have promised myself either not to speak at all, or when I do speak, to speak the truth as I see it, and the whole truth.

11. For certain purposes in the discussion of the question, it is well to bear in mind that he who cries out most loudly against the nefarious crime of abortion in public is occasionally quite an industrious abortionist within the four walls of his office.

12. The last word has not yet been spoken on the subject. I do not claim it has. But whatever the opinions may be, it is time that the question of the justifiability of abortion under certain nonpathologic conditions be freed from cant and hypocrisy, hysteria, theologic and traditional bias, and be discussed in a calm, judicial, scientific, and above all, humane spirit.



## CHAPTER XIX

### SYPHILIS

**HISTORY.** It is generally asserted that this fell disease is of American origin and was brought back by the sailors who returned with Columbus from the West Indies. However, as will be shown presently, in the past few years serious doubts have been thrown on this alleged origin.

The name was given by an Italian physician—Fracostorius—in a poem written in 1530. Here he traced its start to a mythical shepherd *Syphilus*, who was thus afflicted by Apollo as a punishment for blasphemy. Very old Chinese writings, as far back as 26 centuries before Christ, contain accounts of diseases which could be cured with mercury. In the first century of our era, sores on the genitals were described by classic writers, and a few years later, eating away of the soft palate. All these may really have been examples of syphilis; also the sores which rapidly destroyed the sexual organs and referred to by an Arab writer in the eleventh century.

Syphilis began to attract attention in 1494, hence not long after the return of Columbus, when the Spanish garrison in Naples was besieged by the French troops. It is not known with certainty what the number of Columbus' crews was, but it was probably not over 100, and Fracostorius just alluded to, remarked it was scarcely possible that such a small number could be responsible for the widespread ravages in Spain and Italy within the space of a few months. Moreover, neither Columbus himself nor his son Ferdinand make any reference to the disease in their writings.

Now great ravages are often made in the bones of syphilitic individuals, and if syphilis did owe its origin to America, we should expect to find some evidence in the skeletons of the mound-builders and other ancient races, with but crude methods for treatment or none at all. Yet, strange to say, none have been unearthed so far. To be sure bones have been discovered with destructive changes evidently due to syphilis, but there is no certainty they date back beyond 1492. Before the Europeans arrived there was evidently a far-reaching system of barter, for sea shells have



THE LATE FRITZ SCHAUDINN (1875-1906)

Like Metchnikoff, not a doctor but a student of animal life. Owing to his mastery of the method of staining minute animalcules, was able to immortalize himself by his discovery in May, 1905, of the germ of syphilis. He was cut off prematurely by pneumonia, which put an end to a career probably destined to afford other equally meritorious discoveries.



been found in the graves a long way from the ocean, the copper from Lake Superior as far as the Gulf of Mexico, and the famous red pipestone of Minnesota hundreds of miles off. Yet in all this enormous expanse of territory traces of syphilis are lacking, as they are in the older burial places of Peru and other countries of South America.

In 1913, a manuscript of recipes was discovered in Italy, the date—judging by the handwriting—being about 1425. However this may be, a later owner adding some material, states the book came into his hands in 1465. The original collection contains two recipes for the “French disease,” one of the early names for syphilis, a very significant fact—for if it was written in 1425, or about then, this was some score of years before Columbus was born.

Some diseased bones were dug up in the region of the Marne, just before it became famous in the World War, and were sent to a pathologist in Lyons, who for over a quarter century had been studying the diseases of bone. After due examination he had no hesitation in stating the changes found were due to syphilis, and was then stupefied to be told by the finder that the bones came from a prehistoric burial—a cavern of the polished-stone age. While this epoch is later than the first or rough-stone age, its antiquity is staggering, so much so that Columbus and his times are as last week.

So, until more conclusive evidence is forthcoming, when the American origin of syphilis is set forth, we would do well to assume an attitude like that of the man “from Missouri.”

More progress has been made in the last sixteen years in our knowledge of syphilis than in the four and a quarter centuries elapsing since it became notorious at the siege of Naples. First of all (1905) the cause was traced to an animalcule, next year a nearly perfect means for discovering its presence was introduced, and in a few years more the famous “606” was given out. All these three steps were due to the Germans.

**Cause.** The most ridiculous theories were brought out long ago to account for the origin, such as intercourse between men and animals, but these were gradually dropped as the stock of learning increased. When the microbes were found some years back to cause many diseases, it was natural to seek for the cause of syphilis among them, and at first the various vegetal microbes



alleged to be responsible were one by one disproved. Attention was then directed to animalcules and this was successful—though in a roundabout way—for two German observers investigating the claims of a given animalcule as the starting point of the disease, stumbled on the genuine cause.

This, of course, has a jawbreaking Greek name (*Spirochæta pallida*), but for our purpose I shall allude to it as “the pale spiral.” In spite of its long name its size is excessively small. To measure objects seen with the microscope the *mikron* is used, this is only  $1/1000$  of a millimeter, which is itself—as will be remembered— $1/25$  of an inch. Accordingly our pale spiral measures from 6 to 15 mikrons long. Seen through the microscope the germ has a close resemblance to the everyday corkscrew, twisted in a regular and cleancut manner. The turns average from ten to twenty for the individual germ.

There is no doubt as to its being the cause, it has been found everywhere in the body over and over again, since it was first met with sixteen years ago. Moreover, it has been shown present in the urine, the seminal fluid and the breast milk.

Some microbes have little paddles, as it were, attached to the edges by which they propel themselves, our pale spiral has none of these. Nevertheless, it moves—though somewhat slowly—in the direction of its length, and twisting on itself as it travels.

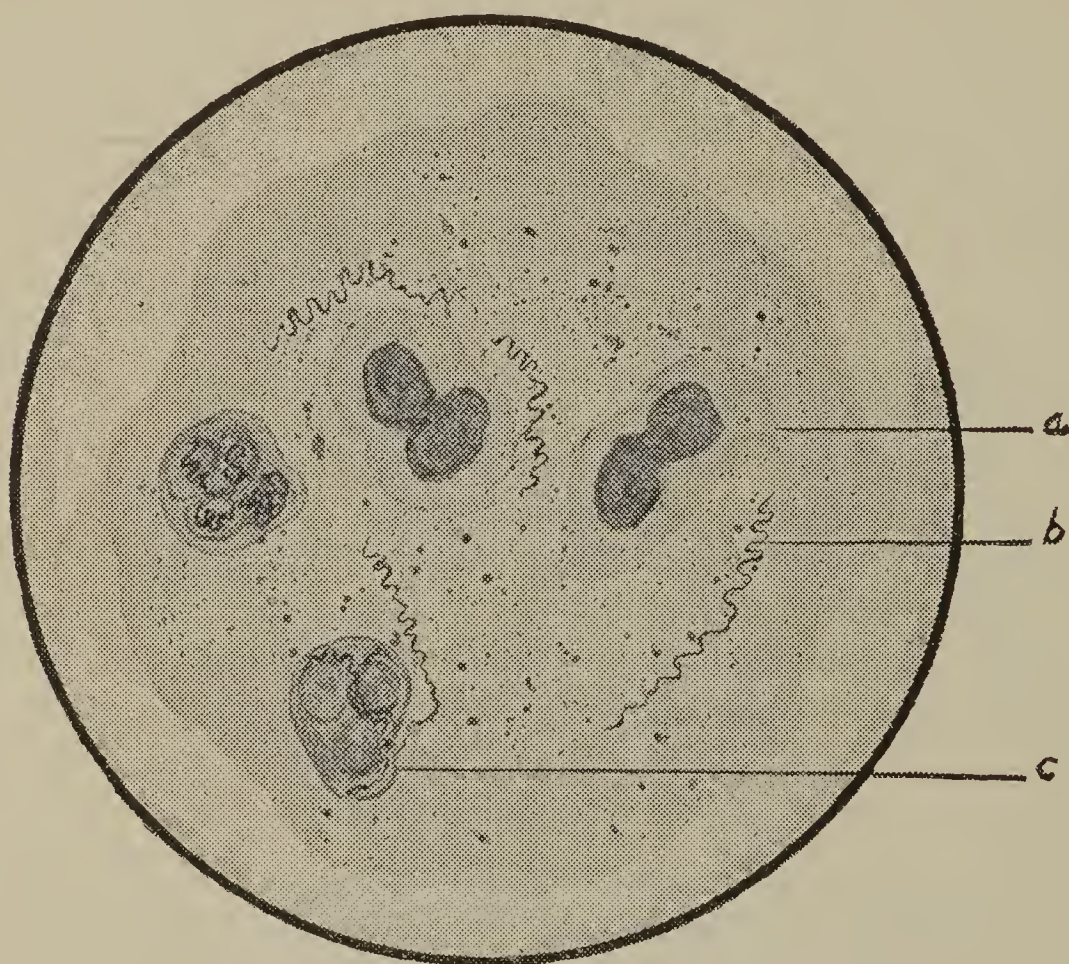
**Manner of Infection.** While syphilis can be transmitted experimentally to animals (the manlike apes, rabbits, etc.), for all practical purposes it may be said to be confined to human beings. Hence the disease is transmitted by contact—sexually or otherwise—between such human beings. In most instances it follows sexual relations; in a small number it may be due to use of drinking cups, pipes, spoons, forks and so on which have been used shortly before by syphilitic individuals and not cleaned.

The latest estimate as to the frequency of this indirect conveyance is between 5 and 10 per cent.

The pale spiral under proper conditions can be kept alive for a few days outside the body, otherwise it dies in a short time, say five or six—maybe eight—hours. Fortunately there is a great difference here from the germ causing consumption,

which may remain alive and dangerous for days, weeks, and even months after leaving the body.

**Course of Disease.** Syphilis is important since it is transmitted to the second generation, and it is the only disease of consequence which is capable of such transmission. In consumption it is the weakened resistance to disease which is transmitted; and it is still uncertain whether cancer is hereditary or not.



THE PALE SPIRAL (SPIROCHÆTA PALLIDA)

This little animalcule, discovered by the late Fritz Schaudinn, is the cause of syphilis. (a) pus cells without spirals; (b) the pale spirals; (c) same inside the white blood cells.

Besides the preparatory stage or period of incubation (*A*) three others can be distinguished: (*A*) The stage of incubation, from the time of infection to the onset of Stage I, averaging three to four weeks.

1. The primary stage is ushered in by the appearance of the "hard" sore (chancre), and keeps up for several weeks, six on the average. During this interval the whole body is being invaded by the poison, and an eruption of the skin which makes an abrupt appearance, signifies the beginning of stage II. The



duration of which stage varies considerably—a few weeks or months; several months; or a year and more, gradually subsiding. Stage III is not always met with, but the first two are practically constant. The reason for this is that sufficient drugs have been taken before the last stage is entered upon.

(A) *Preparatory Stage*: The germ of syphilis makes its entrance through some breach of the outer skin, or the moist skin lining of the body (mucous membrane). We have just seen how small this germ is, and evidently a wound too small to be seen with the naked eye will be large enough to permit ingress. After entering the body the germs remain in place for some time, multiplying in number; finally they have increased enough to cause much irritation in the neighborhood. As a result there is a sore, chancre, or the start of—

(I) *The Primary Stage*: It might be expected that the sore would speedily be noticed by the diseased individual, but this is not always the case. The chancre may be in the channel for the urine or elsewhere in the interior of the body of both sexes, hidden from view; or it may be so small and insignificant it attracts no attention whatever. In fact it is estimated that nearly one-half of the men with syphilis—and considerably over that number for women—deny the occurrence of the chancre, having overlooked it or forgotten all about the insignificant beginning, accompanied as it was by little or no pain.

However, the customary chancre is a hard lump about the size of a split pea, which soon turns into an open sore or ulcer. This is usually round, single and attacks by preference the extremity of the penis in the male, and the external genitals in the female.

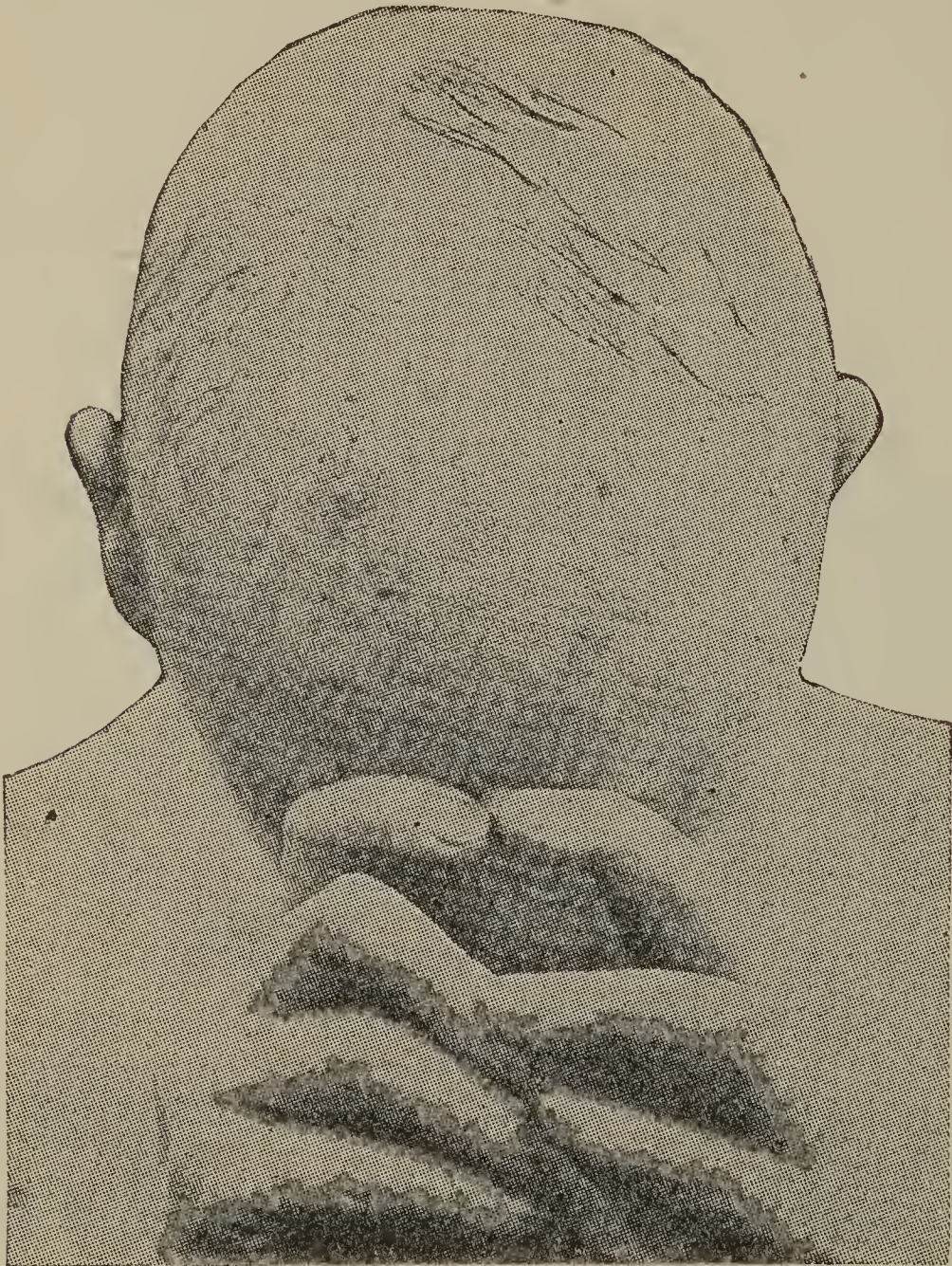
Extragenital chancres can occur anywhere on the body to which access can be had by the pale spiral. The customary locations are on the face (especially lips), the mouth, or the hands. A Philadelphia specialist has reported the infection of eight young girls by a single man through “kissing games” at a party.

(II) *The Secondary Stage*: We now begin to meet evidence of the wide distribution of the causal germs through the blood. Some individuals show no disturbance of the general health; others, sooner or later, have some fever, loss of appetite and weight, then grow pale and have pains—like rheumatism—



in the bones. "Knots" or "kernels" develop, for instance along the side of the neck and are tender when pressed on.

But other things being equal, the skin is most affected during this stage. The first manifestation is a rash, of rose-



BALDNESS (ALOPECIA) DUE TO SYPHILIS

This picture is that of a patient in the Paris Hospital for Venereal Diseases. Thinning of the hair on scalp is not uncommon, but it seldom reaches the extent shown.

colored spots, bearing some likeness to that of measles, and covering most of the body; the color soon fades and leaves brown stains which in turn disappear. The next is a series of hard pimples (or "papules") which differ considerably in size,



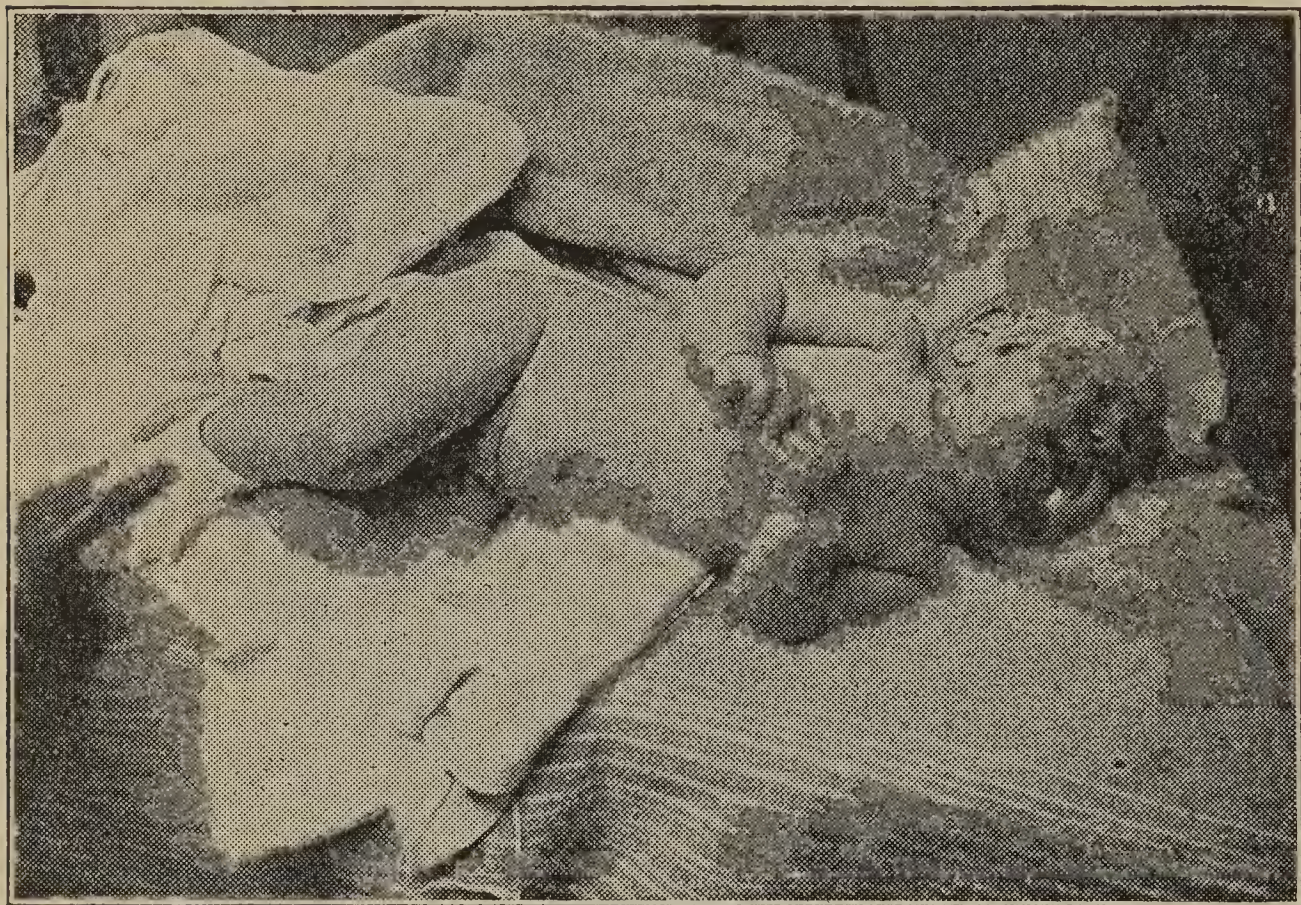
but persist longer than the rose-rash. Still later there may be small abscesses ("pustules") like those in chickenpox. The hair generally falls out either over the whole scalp, or in patches here and there. If the abscesses are very numerous on the scalp, the hair roots are destroyed, and the individual has a moth-eaten appearance as a result.

Changes similar to those on the outer skin are found in the lining of the mouth and throat, and producing considerable discomfort soon attract the notice of the individual. Moreover, the history of their presence is of much importance in deciding later on what the original trouble was. These ulcers covered with a white coat, are to be met with on the inner surface of the cheeks, the soft palate, tonsils and tongue. Also at the beginning of the windpipe, and here they may produce temporary or permanent hoarseness. The discharge from the ulcers in the mouth is excessively dangerous, and is usually responsible for the transmission by way of drinking glasses, pipes, and similar articles. (Many cases of syphilis are known to doctors in which during tattooing the "artist" moistened the needles or the ink in his mouth. In Belgium, years ago, so many glass-blowers became syphilitic by passing the blow-pipe from one to the other, that a law was enacted making it obligatory for each workman to have his own instrument.) Eye-troubles causing much disturbance of vision are seen as well.

(III) *The Tertiary Stage*: In this stage—while any of the bodily structures may be attacked—the skin again leads in frequency; then in order the nervous system, bones, walls of the bloodvessels, the liver and other organs. At least this is the order in which masses of gummy, elastic material are deposited. Such "gummas" range in size from the head of a pin to that of a small plum, and they appear mostly in the third year of the disease, then grow less with the lapse of time. While apparently possible at any time during the subsequent life of the individual, they are seldom in evidence later than the twentieth year of the disease. Here an exception must be made in favor of the arteries and the nervous system. The late Sir William Osler, the famous physician, wrote: "On no system does the virus of the disease fall with greater intensity in all stages than on the blood-vessels; it is safe to say that through the arteries syphilis kills more than through any other means."



(It must not be understood that there is any sharp division between these stages, that a given subject goes to sleep in the primary- and wakes up in the secondary-one. On the contrary, they merge imperceptibly into each other.)



BABY BOY, THREE MONTHS OLD, WITH INHERITED SYPHILIS

"Snuffles" since age of two months. Third child; first born dead and prematurely (at six months); second died at age of five months.

*Hereditary Syphilis:* It is well known to doctors that syphilis is the principal cause of children being born dead ("still-births"). When the baby is infected through the mother at any time during the first half of pregnancy, it is very apt to die. If born alive the evidences of the disease make their appearance quickly in the form of "snuffles," the nose being stopped up by a thin discharge, and a copper-colored eruption on the skin. The bones, joints and eyes are likewise involved. Of 302 children, the symptoms appeared in the first month in 140; in the second in 71; in the third in 71; and in the remaining 20 at various times before the end of the second year.



An uncommon variety of "tardy" hereditary syphilis usually makes itself manifest before puberty, though it may be long delayed, up to 20, 25 or more years. Transmission to the third generation is possible, though no undoubted instance has been recorded thus far.

Eye troubles sometimes develop and leave scars which prevent the rays of light passing through and interfere much with sight. In a few cases deafness develops in time, and may affect both ears, and that permanently. Another variety of this hereditary type is the changes in the teeth called "Hutchinson teeth" from the English surgeon who first called attention to them. The ones especially involved are the central teeth above, which are further apart, somewhat peg-shaped and with a decided notch on the cutting edge. As only the permanent teeth are thus changed, this will not be in evidence till about 8 years of age.



HUTCHINSON'S TEETH, THE CONDITION FOUND IN INHERITED SYPHILIS

Of course, children may become affected by acquired syphilis the same as adults. This may occur from kissing, etc.; it has often followed the rite of circumcision, and was not unknown in former days when vaccination for smallpox was done from arm-to-arm instead of with calf-lymph as at present.

**Frequency and Prevention of Syphilis.** As is the case with everything which has to deal with man and his activities, the most diverse figures have been sent out regarding the ratio in which syphilis may be expected among the populace at large.

It has been estimated that over 10 per cent. of the male adults in Europe have the disease, and from 5 to 10 per cent. of the same population in this country. However, for the U. S., the ratio apparently is not increasing to judge from the statistics of the Public Health Service: From 1881-90, when 30,000 to 50,000 patients per annum were treated, the highest per cent. of those with syphilis was 9.7 and the lowest, 7.6. From 1910-14, the total had risen to 50,000 to 53,000 and the extremes were 8.8 and 6 per cent.

A French observer found the disease was most often contracted in men between the ages of 20 and 26—the maximum be-

ing 23 years ; in women between the ages of 18 and 21—the maximum being 20 years. Some 8 women and 20 men out of every 100 of each sex contracted the disease before the age of 20. In the U. S. it is believed the greater number of infections occur from 20 to 25 years of age. So far as prostitutes are concerned, about one-half are diseased, but the longer they resort to this calling naturally the more chances of infection, and it is claimed that with the lapse of time practically every one is syphilitic.

In considering the prevention of syphilis I shall not discuss the “redlight district” and its denizens, which is dwelt on elsewhere. Much has been done in the past few years in this country to lessen the ravages—prohibition of the common drinking cup, of common towels, supervision of barber shops, hotel-, restaurant- and other employes having to do with the preparation and serving of food. Some have even gone so far as to advise individual communion cups. Some states and cities have enacted laws and ordinances making syphilis a reportable disease, the same as diphtheria, etc., and furnishing free treatment.

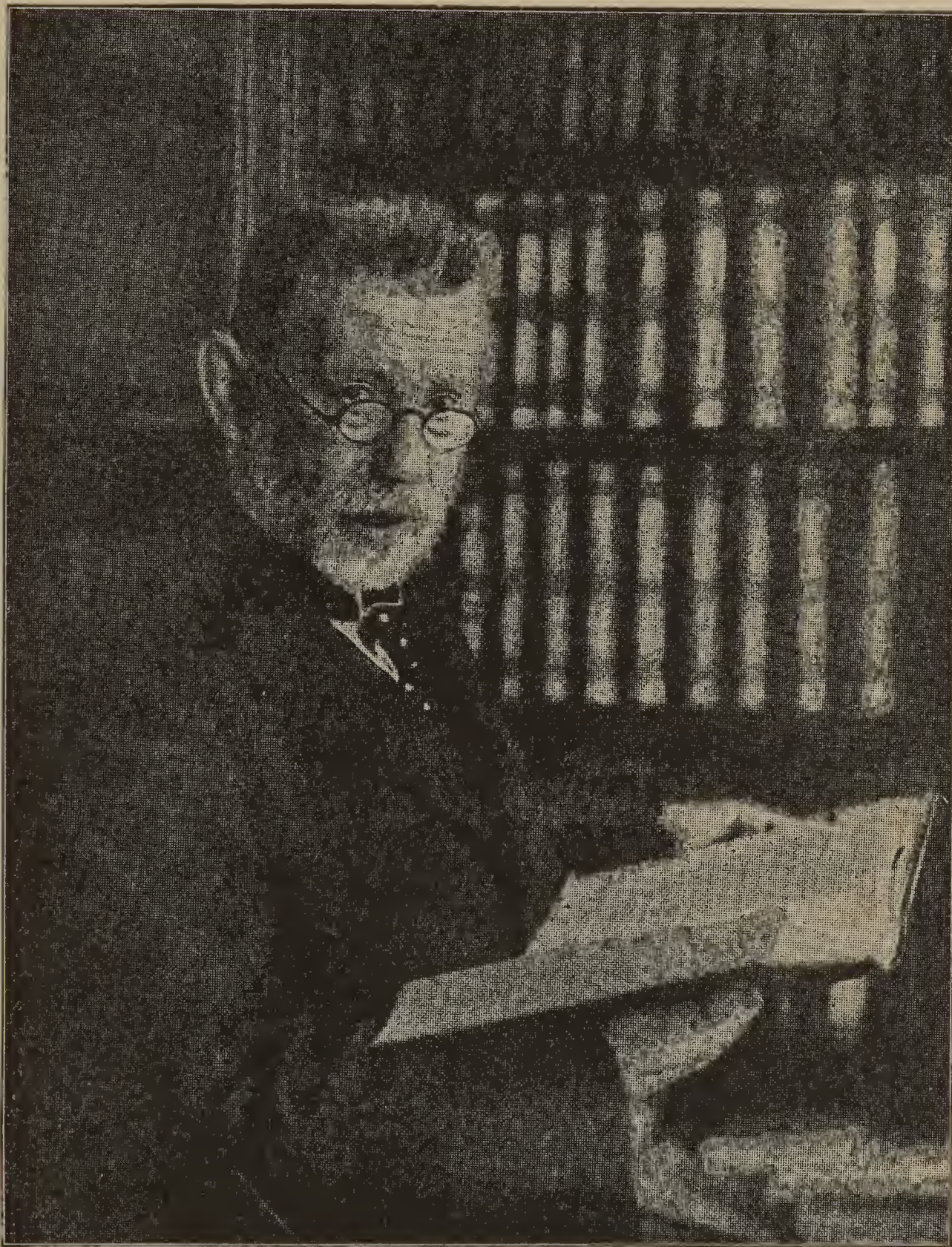
Coming now to prevention proper, and disregarding the moral or ethical side of the problem, it has been found that by means of certain drugs within an hour after exposure, 99.6 per cent. of the cases are prevented from acquiring venereal disease. (The usual one is 33 per cent calomel in wool-fat (lanolin) ointment.) This figure is furnished by Moore based on his experience in Paris with the American troops.\*

**Recognition of Syphilis.** Not so many years ago doctors had considerable difficulty at times in deciding that they had to deal with syphilis in a given patient. In many the appearance—and especially the feel—of the sore were conclusive, in others they were deceptive, and in doubtful cases it was sometimes the custom to wait till the case was cleared up by the rose-rash on the skin. For some sixteen years, we have, as already stated, been in possession of a trustworthy test for detecting the presence of syphilis in the body. For the first few days after the chancre makes its appearance, the Wassermann (for so the test is called after its originator) is usually absent, it then rapidly becomes present, from about 25 per cent. of all cases in first week to about 75 to 80 per cent. in fifth week. The test is particularly valuable late in the disease, when untreated cases often show it in 95 out

---

\**Jour. Amer. Medical Assoc.*, Oct. 2, 1920.





THE LATE PAUL EHRLICH (1854-1915)

In his laboratory at Frankfort-on-the-Main he carried on an extensive series of investigations on the blood, etc. Turning his attention to syphilis, he made several hundred researches, and at length (1910) No. "606" proved to be the long sought-for remedy.



of every 100 cases. The cost of the test is not high even by private chemists, and many of the states and large cities arrange to have it done free for worthy individuals.

Even when too early for this test, the characteristic pale spirals can be detected in the primary sore by recently discovered methods, and proper treatment commenced at once.

**Treatment of Syphilis.** This is quite outside the scope of this book. But it may be stated in passing that almost marvelous results have been had of late years by the use of "606" (or arsphenamine as it is now called), in addition to the mercury which has been the standby for hundreds of years.

**The Consequences of Syphilis.** Several of these have already been referred to. In addition to the lifelong invalidism of the parents is the enormous death-rate among the children.

The French author just mentioned, had unusual opportunities for seeing the ravages of the disease, since he was on the staff of the large Paris hospital which admits only patents with that and other forms of skin disease. Several years ago he wrote that of 4,700 patients under his charge, 2,009 had paralysis of the brain and spinal marrow. This seems to be exceptional, for the latest figures are that from 1 to 5 per cent. only of individuals with syphilis end with these paralyses. On the other hand locomotor ataxia is in most instances due to syphilis, and many writers of late do not describe it under that name but as "syphilis of the spinal marrow."

In 1914, the experience of all the American life-insurance companies with all kinds of disease was published. The number of known or suspected syphilitic subjects was very large—25,000, and there were 328 deaths, while the expected deaths by insurance companies were 198.82. In other words, the excess of deaths was almost 70 per cent., and the average expectation of life at the different ages was lessened by about  $5\frac{1}{2}$  years.

#### SYPHILIS A PROBLEM OF THE NATIONS\*

To give a purely technical definition, "Syphilis is a contagious disease, chronic in evolution, intermittent in manifestations, and indefinite in duration, caused by a specific microbe discovered by Schaudinn in 1905." Or in more simple language, syphilis is a disease caused by a certain definite poison which is introduced

---

\*By A. Corbett-Smith.





AUGUST VON WASSERMANN (BORN 1866)

In 1906 discovered the nearly infallible means for detecting syphilis, called after him the "Wassermann test."



into the system only by actual contact with the poisoned or infected part of another's body, or an article. When once infected, and unless adequate remedies and treatment are forthcoming, the poison may in time permeate to any part of the body, from the glands nearest to the infected spot to the nervous system itself.

Speaking generally a person may become infected in one of two ways: by (a) *sexual* contact, *i. e.*, through sexual intercourse with an infected person, and (b) *non-sexual* contact, *i. e.*, from some infected person, or from an article, such as a barber's razor, a vaccination lancet, &c., or from kissing, from drinking out of an infected cup, &c. Under this heading I will include all cases of "innocent" contagion.

While *sexual* infection is by far the more common, yet it is a grave mistake not to take serious account of the large number of cases due to *non-sexual* contact. A mistake because of the attitude of stern morality which people are wont to adopt towards the unfortunate sufferer; the conviction that the disease must necessarily be due to—a "moral lapse," shall we say?

The poison of syphilis is by no means confined, as is popularly supposed, to the genital organs, although that is naturally the region where the disease, when due to sexual contact, more commonly first manifests itself.

Syphilis is a *chronic* disease. That is to say, when once the poison has invaded the system, the body remains in a state of infection, either latent or open, for an absolutely indefinite period. The disease may show signs of its presence five or ten years after the original infection. Cases are recorded of symptoms appearing from twenty-five to fifty-five years after.

But these symptoms are *intermittent* in their appearances. Though the body may remain infected there may quite possibly be no visible sign of the disease, save at intervals. The patient may, in fact, imagine himself to be fully cured. Then another outbreak, more serious than the last, may appear in a totally different part of the body. Fournier compares a body in such a condition to a volcano in a state of intermittent eruption; a series of distinct outbreaks separated by periods of quiescence.

The symptoms of syphilis are classified under three distinct heads, as they appear in chronological order. Thus the first appearance of the disease after contagion, usually in about thirty



days, and evidenced by no more than a comparatively insignificant sore called the *chancre*, is spoken of as the *primary symptom*.

This *primary* period usually lasts about six weeks, and the chancre, which appears at the spot where contagion was effected, will probably heal up quite rapidly. The chancre is in many cases so insignificant that it may readily be mistaken for a pimple, a small abrasion; or, indeed, it may not even be noticed. Attention is generally directed to the chancre by a certain itching, or feeling of irritation. This is an ordinary, normal case, but it must be remembered that in all stages of the disease, even from the *primary* period, the severity of the attack and the exact nature of the symptoms vary with the individual.

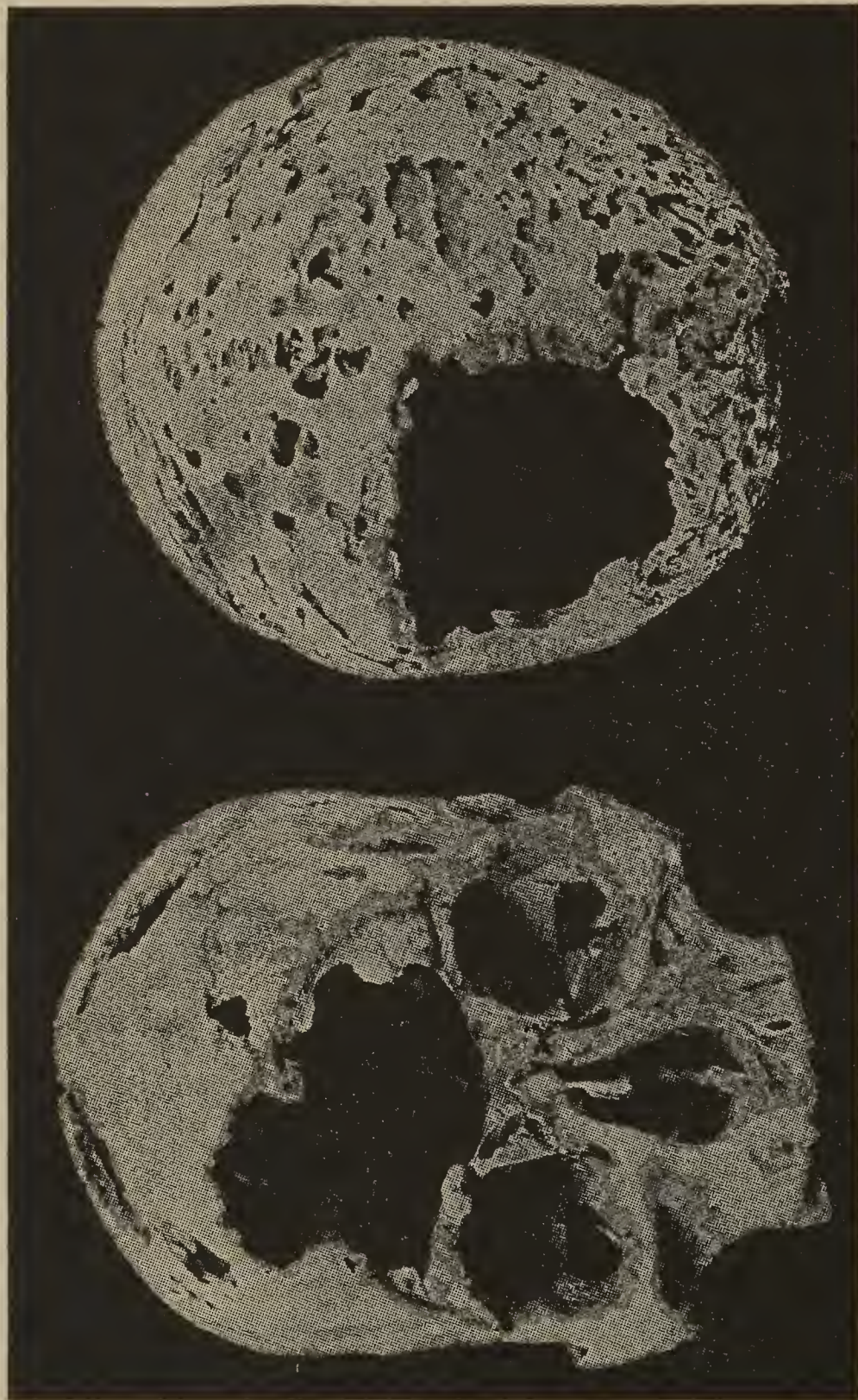
Imagine then that the *primary* period has run its course; that the symptoms have been made light of, or that the application of remedies has ceased with their speedy disappearance. The *secondary* period is then entered. The poison has by now more or less thoroughly permeated the entire body, and it begins to indicate its presence by eruptions on the skin and mucous membranes. Generally the *secondary* symptoms begin with a rash upon the trunk, or perhaps with headaches and insomnia, and, in women, particularly with anemia. There may follow such disorders as ophthalmia, pains in various joints and muscles, affections of the nerves.

In all this there is nothing really serious; nothing, that is, which may not be cured comparatively easily. The particular danger of the *secondary* period lies in the fact that it is the period when the disease is most contagious, when it becomes most dangerous to others. There is, naturally, acute discomfort, even pain, and certainly disfigurement. These symptoms should subside under proper treatment. "By itself it is a trifle; but by its contagiousness it is a plague."

If then the subject has, at this stage, consented to undergo prolonged and careful treatment, and if such treatment has proved successful, then one may reasonably expect to find the disease at an end. But if the subject has been insufficiently treated then the *tertiary symptoms* are inevitable. In fact the chief cause of the development of *tertiary* symptoms is almost invariably inadequate treatment. At the same time, however, it should be observed that there is no sharp dividing line between *secondary* and *tertiary* symptoms. Cases of *secondary* or contagious lesions have been



observed so long as fifteen years after the original infection; and instances of *tertiary* lesions have been recorded during the second year of the disease.



INFLAMMATION OF THE BONE COVERING '(PERIOSTITIS) DUE TO SYPHILIS

These specimens from an English museum are very old, before the use of iodid of potash was known. In some instances (right-hand) only one surface was diseased, in others both sides. The bone has died in places, and has fallen out, giving rise to holes in the skull.

But assuming, once again, inadequate treatment we now come to the real disease in all its gravity. It is the *tertiary period* which makes syphilis the hideous plague it is. In a work of this nature, destined for wide general circulation, one naturally hesitates to state definitely what these symptoms are. And yet if this

is not done how else may one bring home to the public the *meaning* of syphilis? Perhaps it will be best to give here, with but little comment, a table prepared by Fournier to show, in relative proportion, the various organs attacked by the disease in its *tertiary* period. Observations had been carried out upon 4,700 patients:—

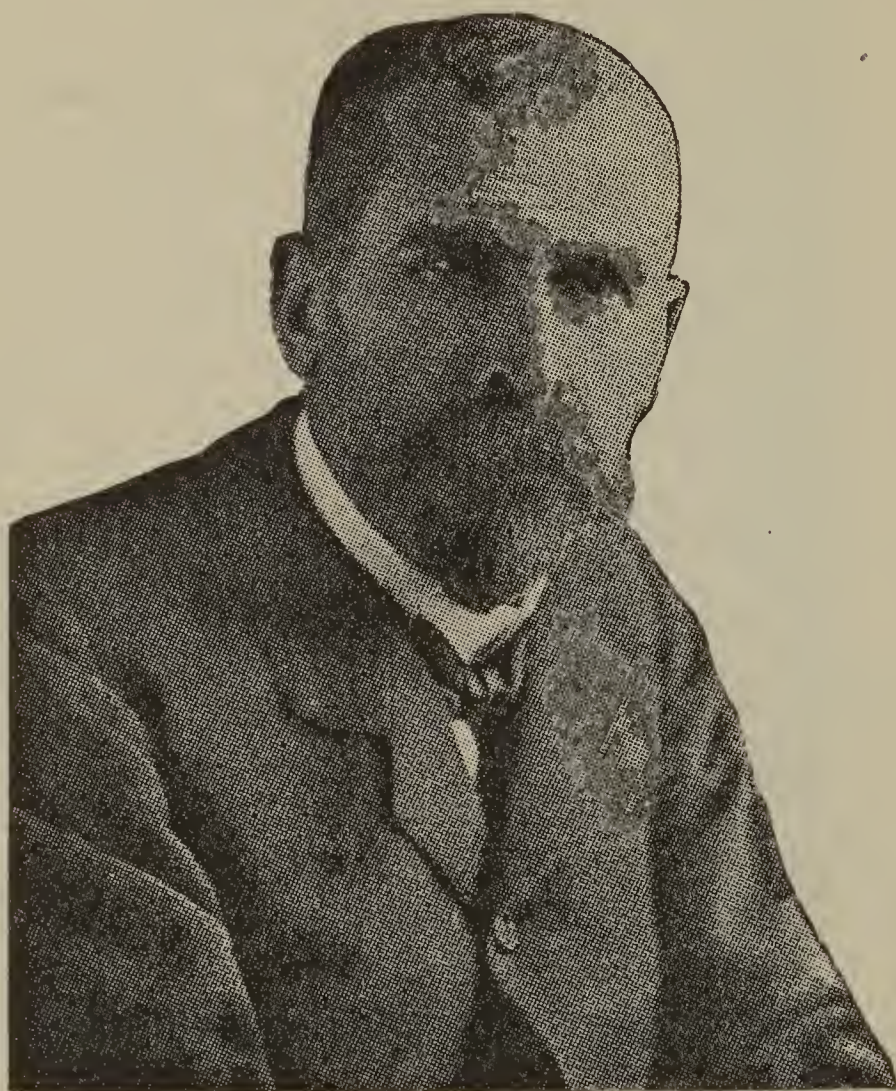
					Cases
Affections of the skin	..	..	..	..	1,518
Subcutaneous tumors	..	..	..	..	220
Tertiary lesions of the	genital	organs	..	..	540
“ “ “	tongue	..	..	..	277
“ “ “	palate	..	..	..	218
“ “ “	throat	..	..	..	118
“ “ “	lips	..	..	..	45
“ “ “	tonsils	..	..	..	12
“ “ “	nasal mucous membrane				10
“ “ “	bones	..	..	..	556
“ “ “	joints	..	..	..	22
“ “ “	muscles	..	..	..	23
“ “ “	digestive tube	..	..	..	22
“ “ “	larynx	..	..	..	36
“ “ “	lung	..	..	..	23
“ “ “	heart	..	..	..	12
“ “ “	aorta	..	..	..	14
“ “ “	liver	..	..	..	11
“ “ “	kidney	..	..	..	39
“ “ “	eye	..	..	..	111
“ “ “	ear	..	..	..	28
“ “ “	arteries and veins	..	..	..	17
Syphilis of the brain, spinal cord and nervous system generally	..	..	..	..	2,009
Other lesions	..	..	..	..	22

Two points, arising out of the above table, suitably call for comment. The first thing which must at once strike the reader is the astonishing *ubiquity* of the disease; that no single organ of the body is immune from attack. I have referred to the fact that the severity and exact nature of that attack vary with the individual subject. Thus, taking three cases of *tertiary symptoms*, the first subject may develop epilepsy, the second some form of lung disease, and the third may become totally blind.

The second point which will be noticed is the enormous number of cases in which the *nervous system* is affected: 2,009 in 4,700 patients! Does this fact throw any additional light upon my introductory remarks on the subject of insanity? *The very center and directing agent of the human body forms the chief point of attack by tertiary syphilis.* And the converse of this is equally true: that syphilis is by far the most important cause of disease of the nervous system.



The close inter-relationship between syphilis and the degeneration of the nervous system would provide material for a bulky volume. Especially is this so at the present time when, owing to the conditions under which most of us live, the nervous system offers less and less resistance to the strain placed upon it. Statistics for the United States are not available, but the evidence given by specialists all tends to confirm the experience of Fournier.



EMILE ROUX

Director of the Pasteur Institute (Paris), member of the Paris Academy of Medicine, and the Academy of Sciences. With Metchnikoff succeeded in inoculating the man-like apes with syphilis. Also prominent in introducing antitoxin for prevention and cure of diphtheria.

The report upon the census of 1911 in England and Wales has recently been published. There has been a steady increase in the rate of insanity since 1871, which has assumed alarming proportions in the case of children under fifteen years of age. With these the figure stands at 823 per million, showing an increase

since 1871 of 30.8 per cent. Taking all ages together, 4,491 per million were insane, an increase of 10.1 per cent since 1901. Further, about 60 per cent of cases known to be syphilitic admitted into asylums between the years 1908-12 were general paralytics. A serious state of things indeed.

#### SYPHILIS AND OTHER DISEASES

We have seen from Fournier's statistics that no single organ of the body is immune from syphilitic attack. But it is possible to go further and to assert that there are few disorders or diseases known to mankind which may not be developed, either directly or indirectly, from syphilis. Since the discovery of the Wassermann test, we have come directly to connect an ever-increasing number of diseases with syphilis. So remarkable have been the results of the test that we may assert that at least one-half of all disease, if not a still larger proportion, is due more or less directly to syphilis. If gonorrhea be also taken into account, I should be strongly disposed to say, from a careful study of the question, that perhaps *two-thirds of the diseases known to civilization either have their origin in sexual disease, or that sexual disease is an important predisposing cause of them.*

Now that is a serious statement to make, but I will give some further evidence in support of it. Dr. Carl H. Browning, the Director of the Pathological Laboratories, Glasgow University, has recently carried out observations upon 3,000 cases. In this work he used the most scrupulous care and precision of detail not only in aiming at a complete investigation in each case of (a) the condition of the patient, (b) the condition of members of the patient's family, and (c) the history of the health of the patient and his family; but also in the actual working of the Wassermann test. I may, however, add that Dr. Browning first of all thoroughly satisfied himself that the test gave what is called a "positive reaction" only when the poison of syphilis was actually present. Here is a summary of the results:

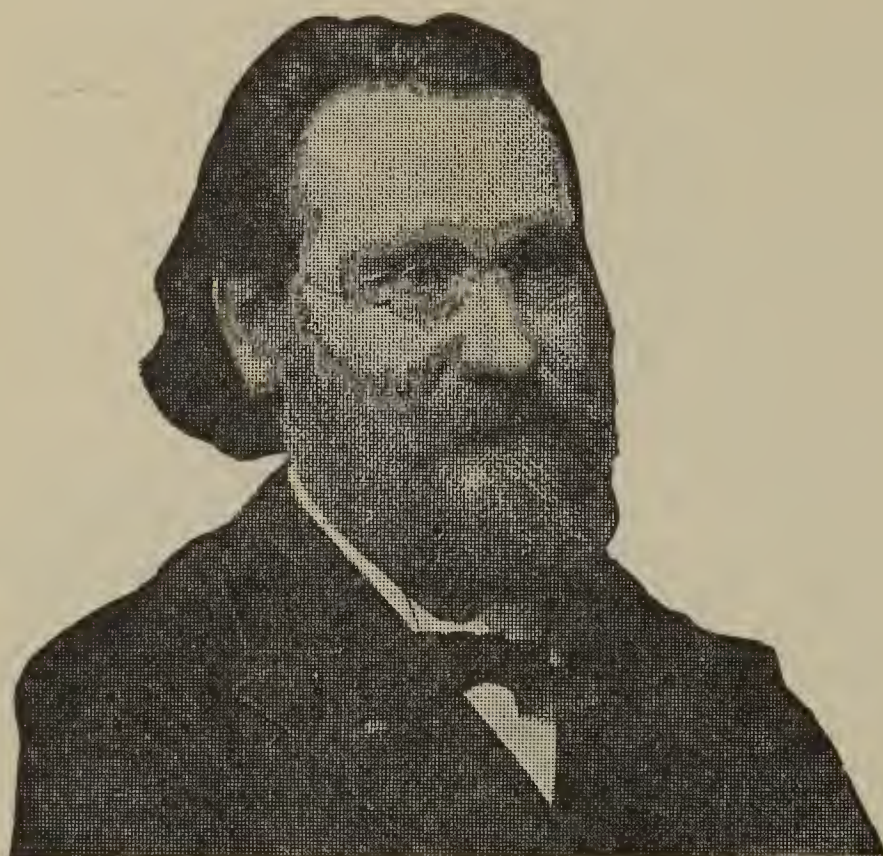
(1) Among 331 unselected cases of children attending hospital as outdoor patients, syphilis was present in a proportion of 14 per cent.

(2) *Mental Deficiency and Epilepsy.*—Out of 204 cases of young people examined, syphilis was present in 95 cases; 46 per cent. Of these, 105 children were either under school age (13



being less than 5 years old) or were not fit to attend through mental defect. Taking into account as well other members of the patients' families, the proportion of syphilitic infection was found to be 59 per cent.

(3) *Heart Disease in Children*.—25 cases were examined. Infection was present in 17 and 1 doubtful, the ages of these ranging from 1 month to 3 years. Of the 18 cases, 9 died when less than 6 months old.



THE LATE ELIE METCHNIKOFF (1845-1916)

Russian scientist. In addition to numerous discoveries in other lines, with Roux, succeeded in inoculating the man-like apes with syphilis. Received the Nobel prize in 1908.

(4) *Deafness in Children*.—82 deaf children were examined; 17 gave a "positive" reaction. There was, further, every indication that syphilis plays a much greater part in this condition than could be detected by the test.

(5) *Ozena* (bone diseases).—Out of 52 cases, 16 gave a "positive" reaction (30 per cent).

(6) *Aortic Disease*.—Out of 46 cases a "positive" reaction was present in 64 per cent.

(7) *Nervous Diseases*.—122 cases were examined. A "positive" reaction was given in 41 per cent.



(8) *Eye Diseases*.—Out of 84 cases the presence of syphilis was indicated in no fewer than 57. In one form of eye diseases (*interstitial keratitis*) the percentage was 95 per cent of “positive” reactions.

(9) *Severe Gynecological Ailments of Women*.—37 cases were examined: 20 gave “positive” reactions, and 2 others had children who gave similar indications of syphilis. Of another subdivision 39 cases were examined and 18 reacted “positively,” 59 and 46 per cent.

These results of Dr. Browning’s observations, taken in conjunction with Fournier’s statistics, certainly furnish us with very weighty evidence. It will be observed that a large proportion of Dr. Browning’s cases were children, and therefore that the taint of syphilis was hereditary or congenital. This fact bears upon the question of “innocent” contagion, which we have yet to consider; also upon the hereditary effects of syphilis, which will also be dealt with in due course.

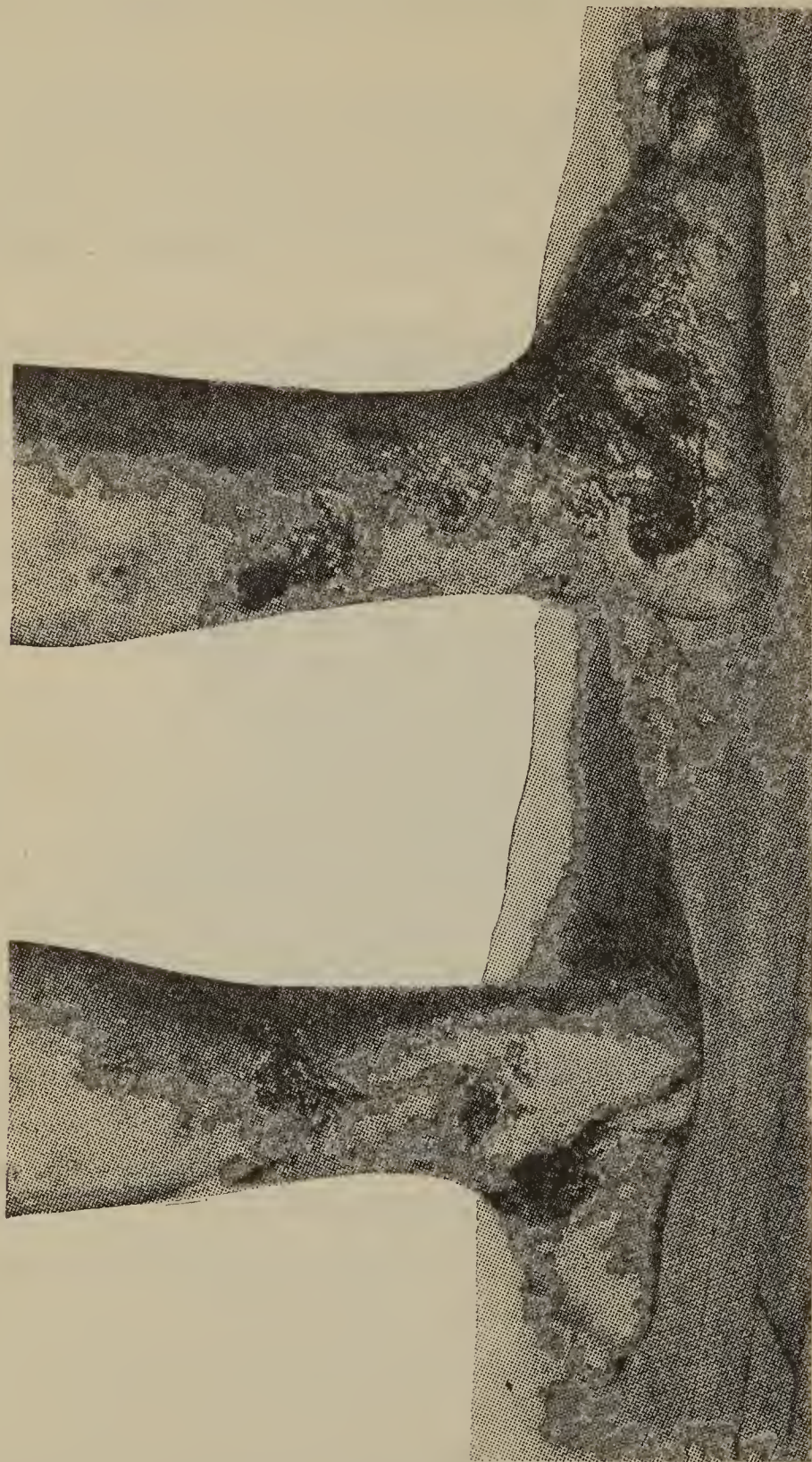
And yet in face of all these appalling facts we still go on drifting. One is simply dumb with astonishment that no practical measures have ever been taken to enlighten the public. What is the use of publishing articles in medical journals and leaving them there to be bound up at the end of the year? What is the use of reading papers at minor congresses, and passing resolutions which are forgotten in a month? The public will not listen? The subject is too dreadful? The public must be made to listen; and to insist that these Augean Stables of civilization shall be cleansed.

*Sexual disease is less dangerous than tuberculosis or even gout if only it is attacked in its primary stages.*

If the nations can enter upon a great campaign against tuberculosis, which is far less serious—I say nothing of the sequelæ of syphilis and gonorrhea—who will assert that sexual disease cannot similarly be attacked?

I wonder how much money is spent annually in trying to convert the so-called heathen to Christianity. I wonder how much time, money, and energy is being wasted over half-a-dozen political and party questions of the day. How many people are affected in any real degree by them? How many by this curse of civilization? What is the Church doing towards stemming the tide of disease? Is it concentrating its energies upon making its adherents a cleaner, healthier, finer body of men and women, of genuine

service to themselves, their families, and their country; or is it bent rather upon nurturing their souls for the hereafter?



SYPHILITIC GUMMAS ON LEG, WHICH HAVE BROKEN DOWN, FORMING ULCERS

*The solution of the problem lies in the education of the individual. What is being done to that end?*

#### NON-SEXUAL, OR INNOCENT CONTAGION

I have indicated that a person may acquire syphilis either by sexual intercourse or by contact with some infected person or article. In considering this latter form it will be more convenient



if we further qualify those two divisions and speak of syphilis either as "merited" or "innocent." Under the former will naturally be classed the majority of cases of the disease, where contagion has been effected through what may be termed *extra-marital* intercourse. Under the latter we may include those cases in which an individual has acquired the disease innocently.

As cases of "innocent" contagion I would include (*a*) wives who have contracted the disease from their husbands; (*b*) children from their parents or nurses; (*c*) medical men and nurses from their patients; and (*d*) generally, those from infected articles.

In these days, when hardly a week passes which does not see some new bogey dangled before the public by the medical or daily press, those who insist upon the dangers in impure milk, unclean restaurant dishes, the house fly and half a hundred similar germ carriers, have come to be regarded with an amused tolerance. Similarly if I set forth here a few cases of syphilis acquired by such contagion, I shall at once be met with the criticism that they are but isolated cases and have no real bearing upon the prevalence of the disease. But if we would be honest in our endeavor to discover the real meaning and significance of syphilis, we *must* take into consideration such cases of "unmerited" contagion. Admit, by all means, that those cases are in the minority, but, in doing so, remember that the suffering caused by them is proportionately greater, because the subjects are innocent; and remember that the factor of heredity is now at work.

Apart from the fact that sexual disease is not a topic of polite conversation, one of the principal reasons why methods of prevention have not been seriously taken in hand by national governments is that the disease is always presumed to be due to immorality. Whenever definite measures have been advocated—and this has happened so many times within the last fifty years—they have invariably been met by certain intensely moral individuals who have argued that a premium would thus be put upon vice. "Sexual disease," they assert, "is an admirable corrective; it is a just retribution. Give us tuberculosis or smallpox to deal with and we shall be most happy to pass any bill. These involve no question of immorality; the sufferers are all innocent people. But sexual disease! If a man likes to go out of his way to expose



himself to infection, and to seek for it in a questionable manner, then he must abide by the consequences."

*Innocent Contagion in Women.*—To take this subdivision first. In twenty-seven years of private practice Fournier states



SYPHILIS AT TIMES ATTACKS THE FINGERNAILS AND THE NEARBY STRUCTURES, CAUSING VARIOUS DEFORMITIES OF THE NAILS. OCCASIONALLY ULCERS FORM DESTROYING THE NAIL COMPLETELY, AND IT IS NEVER REFORMED.

that 887 women affected with syphilis passed through his consulting room. These he distinctly classified into 842 cases where the disease was of sexual origin, and 45 where it was certainly non-sexual. This was his first classification, and it gave a figure of a little over 5 per cent of cases of unmerited contagion. He then

carefully considered the 842 cases. Bringing his observations down to percentage form Fournier states that "out of 100 women affected with syphilis 81 belong to the loose women of all classes, and 19 are married women." Thus, adding these two percentages together, the figure was obtained of *nearly 25 per cent as the average of cases of unmerited syphilis in women.*

"That is my reply," says Fournier, "to those who regard syphilis as being necessarily due to immorality." He adds, further, that he had observed the most scrupulous care and impartiality in making these deductions; and that Ricord, his teacher, remarked in comment, "You have not exaggerated the point at all; I have seen the same as you, and in the same proportions." Such is the result of observations in Paris upon patients drawn from all classes of society. Have we any reason to suppose that the facts will differ materially in this country? [England]

I put this point to Mr. J. Ernest Lane, the senior surgeon of St. Mary's Hospital, and asked him what he had to say upon the subject. He tells me that the most significant fact of the present time is that the majority of the female patients whom he has to treat are very young girls, mostly under the age of 20. That 15 per cent of the patients are married women, and therefore *presumably mostly innocent.* "All the cases," he said, "in the children's wards and the greater part of the married women are cases of 'innocent' syphilis."

It must be remembered that these are cases passing through a public hospital; that the observations do not take any account of the well-to-do classes, the upper and middle strata of society, who would naturally seek treatment from private practitioners. Bear carefully in mind what I have already said about the nature and characteristics of syphilis, and then apply some of those details to any one of the cases mentioned by Fournier and Lane. Those innocent women, and children, now in our hospitals are not being treated for a trivial complaint from which they will shortly recover and face the world again completely healed. It is fairly safe to presume that the majority of them are already in an advanced stage of the disease and that previous treatment, before they thought of entering hospital, was wholly inadequate. Hence their present condition, and hence the increased difficulty in effecting a total cure.

It means that, in all probability, for each case in the wards



there may be three more outside not being treated. Apart from the husband who has infected his wife you must take into account other possible members of the household. The chances are that the woman has had no idea how contagious her disease is. Her children may have become infected by the mother's kiss. A friend may have been similarly infected. The servant, or the daily help, may have drunk out of an infected cup, and, in her turn, taken the disease to her own home. You will see that the possibilities are simply endless. And when that point has been grasped, then think what syphilis actually means, what it *looks* like.

*Syphilis and Marriage.*—There almost invariably arises considerable difficulty in affording adequate treatment to the husband or wife who has become infected, or in whom the symptoms develop after marriage. And the reason is the very natural one that neither cares to confess to the other, even if the gravity of the disease is appreciated. Consequently a local druggist or an advertising "quack" is often consulted, secret remedies are applied, and the poison of the disease continues at its insidious work until some virulent outbreak or collapse ensues. This will perhaps throw a little more light upon the nature of the cases in the hospitals to which I have referred.

In married women the early symptoms of syphilis are very frequently mistaken for those of some other ailment. Thus even secret remedies may not be applied until the disease has got a firm hold. And I need hardly add that in such secret remedy cases the danger of infection for other members of the family is very great.

These several facts probably account in great measure for the higher statistic percentage of women, as compared with men, who develop the more serious disorders of tertiary syphilis. For the percentage is higher.

The second factor in syphilis and marriage which calls for mention is the more advanced age of the individual concerned. I mean that syphilis is more dangerous in the old than the young. A married woman of 28, for instance, may possibly develop graver symptoms than would a girl of 19.

It will be observed that I have made no reference to the *morality* of the matter. Is it really necessary to do so? In writing of this subject of sexual disease I believe that the best way to carry conviction of its gravity is to confine myself so far as possible to simple statements of fact. If these will not convince



then "a little bench of heedless bishops here," with all their preaching, would fail.

I could, were I so minded, draw lurid pictures of families into which the plague of syphilis has been introduced by the husband. To a pure-minded, virtuous woman syphilis is a loathsome thing, a thing belonging to debauched and loose women. It needs little imagination to conjure up the results when it has crept into the home. I recall a case where the wife, after two miscarriages, gave birth to a child infected with syphilis which died almost immediately. Then the revelation of the disease came upon her in a lightning flash, *she realized that her husband was the murderer of her three children*. Mad with grief and hate she stabbed him to the heart, and then killed herself.

Certainly this was an exceptional tragedy, but the case-books of private practitioners will furnish hundreds of narratives of lesser tragedies—of divorce, social ruin and all the attendant miseries to husband, wife and children.

Syphilis, during the active period of life, does not as a rule lead to sterility in the wife, but it is estimated that 42 per cent of miscarriages and abortions are due to the disease. With both parents infected the proportion is so high as 70 per cent.

Proper treatment will hold syphilis in abeyance even if it does not actually cure it. From careful comparison of results the broad rule has been established that: without adequate treatment abortion will result; with proper treatment there will be healthy children; but when the treatment ceases there will be syphilitic children.

It is asserted that the elimination of sexual diseases will put a premium upon immorality. Even supposing, for the sake of argument, that it will, what have we to say for the 20 to 25 women out of a hundred, to say nothing of the children, who are innocently condemned to such suffering? Have they no claims upon our sense of justice?

And yet, with all that I have said about these tragedies of "innocent" contagion, I would again emphasize the fact that, with the sterling remedies which are now at command, *sexual disease is less serious than tuberculosis if only treatment is secured and persisted in from the very beginning. It depends upon the individual.*

*Children and the Heredity Factor.*—Speaking in a general

sense, the unborn babe, or the child after birth, may become infected with the poison of syphilis in one of three ways, which may be further subdivided:

(1) By *hereditary* transmission. This means either (*a*) that the (potential) mother is already infected with the poison before the child is actually conceived, or (*b*) that the father transfers the poison to the mother in the spermatozoa.

(2) By *congenital* transmission. This means that the unborn child has been *conceived* in a healthy condition, but has become infected either before or at birth from the infection of the mother subsequent to conception.



GIRL, 20 YEARS OF AGE, WITH "SADDLE-NOSE" AND FINE SCARS ABOUT MOUTH FROM INHERITED SYPHILIS.

(3) By contagion after birth. That is when a healthy child is born, but the disease is subsequently acquired from an infected parent, a nurse, or, generally, from an infected article.

Taking (1) and (2) we come to speak of "transmission" as being either (*a*) *Mixed*, from both parents; or (*b*) *Maternal*, which includes infection from the mother either at conception or during pregnancy; or (*c*) *Paternal*, where the mother is healthy, but the poison is conveyed as noted in (1), *b*.

What I desire to emphasize at this point is the appalling child mortality which results from infected parents. The above per-



centage figures give some indication of this, and I would invite a very thoughtful attention to them. Let me set them down in tabular form:

Mode of transmission			Syphilis present in	Death-rate
Mixed	..	..	92 per cent.	68.5 per cent.
Maternal	..	..	84 “	60 “
Paternal	..	..	37 “	28 “

Take only the least dangerous of those subdivisions, that of *paternal* transmission. There we find that children born from an infected father and a healthy mother die in the proportion of 1 in 4. But look at the figures of *mixed* and *maternal* transmission. They are almost too terrible to realize. *It has, in fact, been laid down as an axiom that a child born of a mother in a state of recent infection is almost fatally condemned to death.*

The case-books of an eminent specialist in private practice record the history of 44 women who became pregnant in a state of infection. Of the 44 births there were 43 deaths and one living child! The same specialist also records 208 births from 100 infected women. Of these 60 only survived. The remainder were miscarriages or stillbirths. A mortality of 71 per cent! And all of these cases were drawn from the upper and middle classes, to whom the best medical care was open, and who may have been presumed to possess a reasonable amount of intelligence and knowledge. Imagine the figure in the case of the lower classes.

Another set of cases was that of 90 women, infected by their husbands, who became pregnant during the first year of the disease. The births resulted as follows: Fifty miscarriages or stillbirths, 38 deaths shortly after birth, and two infants who survived. A death-roll of 88 out of 90. Again all these cases were drawn from the higher classes of society, and observed in the course of private practice.

It is of the first importance to note that these three series of observations were taken in the ordinary course of practice; that there was no idea of selecting a number of malignant cases with a view to making a pessimistic return. The figures were compared with the results obtained by some fifteen other specialists, and the outcome was practically identical, the mortality averaging 77 per cent.

Dr. Hochringer, of Vienna, published in 1910 the results of his observations at the Children's Hospital in that city. He



records that out of 516 births from syphilis-infected parents 253 were born dead or died soon after birth. Of the 263 survivors 55 died before the age of 4, despite careful treatment; and of the remaining 208 only 51 were normally healthy. Once again then we find a similar percentage, only about 25 per cent of syphilis-infected children growing into healthy adults.

In fact, in every country from which I have gathered information, the story is the same. I have referred to the prevalence of the disease in certain villages in Russia; I will quote from two more authorities in that country. A careful record was kept in Moscow for ten years. During that time there were recorded 2,002 births from syphilis-infected parents. Of this number only 577 children survived. A mortality of 71 per cent! Dr. Tarnowsky records a case of three families with 22 children. Of all these individuals only one healthy adult survived.

Major H. C. French, R.A.M.C., records his personal experience of a similar condition of affairs in India between the years 1896 and 1901.

Dr. Bennie gives evidence in support of his theory that every child possesses a syphilitic taint if either parent has ever had syphilis. He adds that of Australian children 10 per cent are so infected, and that for these the chances of death before puberty are seven times as great as in the case of normally healthy children.

*Hereditary Symptoms in Children.*—In speaking of innocent contagion of children I have dealt so far solely with effects upon mortality. We have now to consider very briefly the effects of syphilis upon living children. I may add that for my authorities upon this question I rely chiefly upon the record of Professor Fournier, Sir Jonathan Hutchinson, Dr. C. F. Marshall, and others.

For the sake of convenience I will adopt Fournier's summary, in three groups:

- (1) The symptoms which affect the individual in a partial manner only, *i. e.*, the part of a system, or a single organ.
- (2) Those affecting the body as a whole.
- (3) Those which are still more serious, and constitute monstrosities.

As regards the third subdivision, which is comparatively uncommon, I think it unnecessary, for obvious reasons, to speak.

The ordinary symptoms of syphilis are, for the most part, absent in infected children. The effect of the poison manifests itself in such ways as malformations of the teeth (which are particularly common) and palate; of the head and skull; of the



CHILDREN BORN OF SYPHILITIC PARENTS MAY EXHIBIT EVIDENCES OF THE DISEASE WHEN BORN. SOME, HOWEVER, DO NOT SHOW ANY MARKED EVIDENCE UNTIL LATER ON.

spine, nose, eyes and ears; of the limbs, such as dislocations of the hip, club-foot, etc.; and in disorders of the heart, etc. All these are included under the first subdivision.

Under the second subdivision are included cases where the general constitution, temperament or vital resistance is affected;



where the child is born "a weakly, puny, wizened creature," too weak to suck or cry. Or it may be brought to life seemingly healthy and may, in a few years, be carried off because it does not appear to have the will to live; dying of no definite complaint, just passing away.

Another type, under this subdivision, is the child whose physical development is permanently arrested; a stunted growth like that of a Japanese dwarf tree, and yet growing older, ever older.

Then there is this question of *Mental Deficiency* in children. Some observations of the first importance on the subject have recently been carried out by Dr. Kate Fraser and Dr. H. Ferguson Watson, upon 204 mentally deficient children, ranging from 1 month to 8 years old. In the great majority of cases there were no palpable traces whatever of syphilis, even when an examination of the parents and relatives gave practically conclusive evidence that it must be present. Of these 204 cases the presence of syphilis was detected, by the Wassermann test, in no fewer than 60 per cent.

Summing up, these specialists concluded that syphilis was the causative factor *in more than 50 per cent of cases of mental deficiency*; and that syphilis was associated with a far higher percentage of cases than could be ascertained by an examination of the patients alone.

I read in the press of a public meeting held to protest against the action of the head-mistress of a school in daring to instruct her pupils in the elements of sex hygiene. I read the comment of a worthy town councillor at that meeting, "We don't want our children to be educated as midwives." Have, then, those parents who thronged the hall been at pains themselves to instruct their children in the things which a child should learn, and in the most beautiful manner? Have they fulfilled their obligations in such a way that they may properly resent interference from a third person? *Oh! this miserable hypocrisy and cant; are we never going to break it down?*

But it has to be broken down, and this generation is going to do it. I refuse to believe that the public will not respond so soon as it has learned the facts. There must be initiated such a campaign of education as will break up once and for all this conspiracy of silence. That campaign has indeed already been

begun and recruits are enrolling themselves by hundreds in the ranks of the invading army. Let the watchword, "*For the Children*," be emblazoned upon its standard, to be carried like a fiery cross to the confines of the world.

*Nurses and Infants.*—Leading directly out of the contagion of children we may suitably consider a few facts concerning the infection of nurses by infants; also the converse, the suckling of healthy children by an infected nurse.

Particular attention has recently been directed to this question by the production of Brioux's play, "*Damaged Goods*." In this there is an episode where the medical attendant forbids the suckling, by a healthy nurse, of a child in whom syphilitic symptoms have developed.

It will at once be apparent how very real this danger must be. The danger is immediate when the symptoms have already developed; but it also exists in the numerous cases in which the child remains apparently healthy for some time after birth. Pinard gives statistics showing that symptoms appear in infants: in 70 per cent during the first month; in 20 per cent during the second month; and in 10 per cent up to the end of the fourth month. Thus a child born of syphilitic parents cannot be held non-contagious during this period.

The main point to be decided is the one considered by Brioux—whether the first duty is due to the infected infant or to the healthy nurse. If the infant is deprived of its natural food given by the natural method then it will undoubtedly suffer. On the other hand the nurse will become infected and will, in all probability, spread the contagion. Here are two cases in point quoted by Fournier:

(1) A child born of a syphilitic father was given to a healthy nurse. The child soon developed symptoms of syphilis and infected the nurse. The latter, in turn, infected her husband, who lost an eye by syphilitic iritis. The nurse died soon afterwards of syphilitic paralysis.

(2) A husband infected his wife, and the child subsequently born was given to a nurse. The child developed symptoms of syphilis and infected the nurse. The nurse, in turn infected her own child, which died in a few months, and also her husband. The nurse also lost an eye through syphilitic iritis,



and a year later gave birth to a syphilitic child, which died in two months.

From these and other similar considerations the rule must be established that "we have not the right to give syphilis to a nurse in order to save an infant."

I will quote one case to show the converse side, viz., the infection spread by a syphilitic nurse. It will be noted that nearly all the cases which are given throughout this work bear upon several other points in addition to the one immediately at issue. While the details are invariably unpleasant I think that definite examples of the effect of syphilis will have more practical value than mere descriptive writing.

A healthy child, of some 8 months, born of young and healthy parents, was given to a strong and apparently healthy nurse. In about six weeks the nurse developed certain symptoms which were subsequently diagnosed as syphilitic. (It was afterwards discovered that she had been undergoing treatment for syphilis, and that her child had died of the disease.)

The child began to waste and developed sores in the mouth, followed by other and more serious secondary symptoms. The mother contracted a chancre on the lip through kissing the child; and this was followed by secondary symptoms, and a subsequent abortion.

The grandmother also contracted the disease about the same time as the mother; as did also two sisters of the child, all developing secondary symptoms.

Finally, the father of the child, who had been warned of the danger of cohabiting with his wife, also became infected, and subsequently developed secondary symptoms.

Here then, in *résumé*, were six serious contaminations and one death, all in a single family, through the infection introduced by a nurse.

One cannot, heaven knows, exaggerate the effects of this disease, but I would not have it thought that my object consists merely in making out the case as serious as possible. My whole object is directed towards setting forth actual facts as clearly as possible and, at the same time, towards emphasizing how fully adequate is the treatment which medical science has at its command if only people will learn to avail themselves of it. That despite all that I have said about the ravages of syphilis the

disease is *less dangerous than, say, typhoid fever, if only remedies are applied and persisted in from the very outset. It depends entirely upon the individual concerned.*

#### THE PREVALENCE OF SYPHILIS

Several eminent personages in Church and State who have perused those statistics which have already been given, have remarked quite frankly that they did not believe them, and have advised me to be as sparing with them as possible. And if I have—*only for the moment I hope*—been unable to convince such masters of learning of the widespread prevalence, I fear that my chances of convincing the general public are very slender indeed.

As I have already several times remarked, the official statistics of sexual disease are only concerned with the three specific forms, and take no account of the many other diseases which, we have seen, are so frequently the outcome. And even here we find further confusion in trying to arrive at an estimate. For it by no means necessarily follows that because the mortality from, say, aneurysm is on the increase, therefore syphilis is also on the increase. Nor must we deduce a corresponding increase in syphilis from the steady rise since 1876 of admissions into lunatic asylums. In both cases we might trace back the causes to the more improved methods in investigating the results of syphilis.

Suppose we consider the numbers of would-be recruits annually refused admission into the army on account of their being infected. On the face of it, this would seem to offer a reasonable basis for a broad calculation as to the prevalence of sexual disease amongst the civil population. We should know, moreover, what part of the country each of these men came from, and this would be an additional help.

Upon this basis we should deduce that syphilis was decidedly upon the decrease, for the number of refusals has been steadily decreasing since 1873.

But before accepting such a deduction there are several facts which must be remembered. Of these the most significant is, I think, that candidates for enlistment are now generally well aware that if they go up for medical examination with symptoms of syphilis they will be rejected. And equally as important to



our inquiry is the fact that candidates for enlistment are by no means representative of the civil population. Would-be recruits are thus drawn from two or three classes only and we are therefore entitled to draw our inferences as to prevalence of sexual disease only amongst those particular classes.

Some systematic and international basis for the collection of statistics in sexual disease is sadly needed. Now and again a state or city will adopt some temporary means for collecting evidence, but it is seldom any more than the glimmer from a shepherd's lantern across a dark moor. New York City, for instance, has just concluded a year's period of compulsory notification. Ten years ago the Prussian Board of Education instituted a careful inquiry throughout Germany. Most important of all, perhaps, we have the results of the careful investigation initiated by Dr. B. Burnett Ham, an investigation which has, I honestly believe, done more than anything else to arouse the public to an appreciation of the gravity of the situation. Incidentally, this was the first occasion in any country when any sound scientific basis (the Wassermann reaction) was utilized to determine the prevalence of syphilis on a large scale.

But, after all, this consideration of the prevalence of syphilis is no more than a digression. The "man-in-the-street" is not particularly concerned with it. It may possibly form matter of additional interest in the same way as the succeeding articles on international aspects, prostitution, and other side issues, but that is all. I will, however, for the sake of completeness, attempt some kind of estimate from such selected data as we have available. Let us take first the results of the investigation in Melbourne.

For twelve months syphilis was made compulsorily notifiable, but it is known that a certain number of private practitioners did not report any cases. Of 5,700 cases reported, 3,160 were found to be syphilitic, or 0.5 per cent of the population. Five hundred and fifty cases at the Victoria Eye and Ear Hospital were also examined. Of these 13.3 per cent were syphilitic. As a result of these and other investigations upon similar lines it was concluded that approximately 5 per 1,000 of the Melbourne population were infected with syphilis; that the damage caused by this and gonorrhea must be enormous.

These results are particularly instructive because Australia

is, practically speaking, a new country, and one in which syphilis would scarcely be expected to have obtained so firm a foothold. The important fact should also be noted that while prostitution does flourish in the cities of Australia there is no economic necessity for women there to earn their living in such a manner. Think for a moment of the conditions which obtain in our great cities, industrial centers, and seaports—the overcrowded homes of the poorer classes, the impossibility of decent privacy in their daily lives, the constant intermingling of the sexes, the absence of sanitation, the use and abuse of alcoholic liquor—all powerful factors in the spread of sexual disease. Think of the vast amount of uncontrolled professional prostitution, and the increase in amateur prostitution. Think of the hopeless inadequacy of our existing facilities for treatment of patients. Paris, with a population of  $2\frac{3}{4}$  millions, has 2,000 beds available for such cases; Berlin, with over 2 million inhabitants, has a still larger number; London, with a population of  $4\frac{1}{2}$  millions, can muster no more than 200.

*Prevalence in Japan.*—The figures given to indicate the prevalence of gonorrhea over syphilis in Japan afford also valuable evidence of the incidence of syphilis amongst the civil population in that country; 4.75 per 1,000 of the young men of 20 years old are infected. And if chancroid and gonorrhea are also taken into account we get the extraordinary figure of 25.26 per 1,000 males at this age suffering from sexual disease. As regards the mortality from syphilis in Japan the returns of the Imperial Statistical Bureau of the Cabinet show that, since 1907, the figure stands at 0.2 per 1,000 of the population, and 9 per 1,000 deaths. The *general* mortality has been 20 per 1,000 of the population.

As a side-light upon this issue I may quote a passage from Professor Blaschko's work, "*Hygiene der Prostitution.*" There he estimates that 45 per cent of the clerk and merchant class in Berlin, between the ages of 18 and 28, have had syphilis, and 120 per cent have contracted gonorrhea. In Breslau the figures are 77 per cent for syphilis, and 200 per cent gonorrhea. He adds, further, that every university student, during his four years' course, contracts one form or other of sexual disease at least once.

Another eminent authority estimates that one German in five



has had syphilis, and that the average for gonorrhea is more than one attack per man. Of course the condition of affairs amongst the male population which these statements imply is simply appalling. It is partly because the number of women in the total population is so much in excess over the men that the percentage of disease is brought down to a credible limit.

There are many other estimates and figures which I might quote, particularly in respect to prevalence in the army and navy. There is, however, one more point in the German statistics to which I may invite attention. It is found that the incidence of sexual disease is almost always proportionate to the size of the town. Thus, taking the adult males alone, we find the following proportions:

Berlin, with 2,000,000 inhabitants.....	14.2 per 1,000 males
Cities with more than 100,000 inhabitants....	10.0 per 1,000 males
Cities with more than 30,000 inhabitants....	5.8 per 1,000 males
Cities with less than 30,000 inhabitants....	4.5 per 1,000 males

In other words it is found that the number of prostitutes, professional and amateur, and so the incidence of disease, increases with the size of the town. Presumably it is a question of demand and supply.

This fact naturally suggests another factor, that of the regulation of prostitution. But I may remark here that between the years 1903-5 the percentage of sexual disease infection amongst recruits for the German Army was highest in those cities where regulation of prostitution is most effective. Also that the incidence among the recruits decreased proportionately with the size of the town.

For the sake of convenience we may now consider our results in tabular form:

#### INCIDENCE OF SYPHILIS IN VARIOUS LOCALITIES

Period	Locality	Per 1,000 of the Population	Remarks
1911	City of St. Petersburg....	*27	—
1911	City of Moscow.....	*22	—
1900	City of Berlin.....	*18	—
1911	Central Agricultural Region, Russia .....	*16	—
1909	Roman (Roumania) .....	15	—
1911	Moscow Industrial Region	*10	—
1911	Siberia .....	* 6	—

Period	Locality	Per 1,000 of the Population	Remarks
1911	City of Copenhagen.....	5.8	Notification not very exact.
1909	Bucarest .....	5.2	—
1911	Little Russia .....	*5.1	One of the richest provinces.
1910-11	Melbourne .....	*5	Underestimated.
1909-12	Japan .....	5	Very approximate only. The incidence is about one-fifth the total amount of sexual disease.
1909	Roumania .....	2.3	—
1913	New York City.....	2.2	One year's compulsory notification: much underestimated.
1906-11	City of Christiania.....	*2.0	Average for five years. Notification reliable.
1911	Lithuania (Russia) .....	*1.3	One of the poorest provinces.

\* Fairly represents, I think, the number of recent and standing cases.

I must once again emphasize the fact that these returns are approximate only and can only be accepted as affording a general indication of the incidence of syphilis. No account whatever, save to some degree in the Melbourne figure, is taken of the *results* of syphilis, and we have already seen the nature and extent of some of those results.

#### MARRIAGE AND SYPHILIS\*

The problem of the syphilitic differs from the problem of the exgonorrheal patient. When a gonorrheal patient is cured, so far as infectivity is concerned, and is not sterile, there is no apprehension as to the offspring. Gonorrhea is not hereditary, and the child of a gonorrheal patient does not differ from the child of a nongonorrheal person. In the case of syphilis, it is different. The patient may be safe so far as infecting the partner is concerned, but yet there may be danger for the offspring.

The rules for permitting a man or a woman who once had syphilis to marry, therefore, are different from those applied to the gonorrheal patient. Here are the rules:

1. I would make it an invariable rule that no syphilitic patient should marry or should be permitted to marry before *five* years have elapsed from the day of infection. But the period of time alone is not sufficient; other conditions must be met before we may give a syphilitic patient permission to marry.

\* Dr. William J. Robinson in *Woman: Her Sex and Love Life*. Critic and Guide Company, New York City. (See advertisement last page.)



2. The man or the woman must have received thorough systematic treatment for at least three years, either constantly or off and on, according to the physician's judgment.

3. For at least one year before the intended marriage, the person must have been absolutely free from any manifestations of syphilis; that is, from any eruptions on the skin, from any mucous patches, swellings in the bones, ulcerations, and so on.

4. Four Wassermann tests, taken at intervals of three months and at a time *when the patient was receiving no specific treatment*, must be absolutely negative.

If these four conditions are fully met, then the patient may be permitted to marry.

It is important, however, to state that, in permitting or refusing syphilitic persons to marry, we are guided to a great extent by the fact as to whether they *expect to have children soon or not*.

In the case of a couple who are anxious to have children soon after their marriage, the conditions for our permission must be more severe than when the couple are willing or anxious to use contraceptive measures for the first years of their married life. For, if a man is free from any skin lesions and from any mucous patches, his wife is safe from infection *as long as she does not become pregnant*. But, if she does get pregnant, she may become infected through the fetus; and, of course, the child also is liable to be syphilitic. Hence, much stricter requirements for syphilitics who expect to become parents are necessary than for those who do not.

In case both the man and the woman are or have been syphilitic, permission to marry may be granted without hesitation, as the danger of infection is absent, but permission to have children must be refused *absolutely and unequivocally*. Regardless of the time that may have elapsed from the period of infection, regardless of treatment, regardless of Wassermann tests, the danger of the child is too great if both parents have the syphilitic taint in them. A healthy child *may* be born from two syphilitic parents who have undergone energetic treatment, but we have no right to take the chance. I, at least, never wanted to, nor ever will want to, take such a responsibility.

**The Danger of Locomotor Ataxia or Paresis.** There is still one more point to consider in dealing with a syphilitic patient. In patients who did not receive energetic treatment from the very

beginning of the disease as also in patients whose treatment was only desultory and irregular, we never can guarantee, in spite of lack of external symptoms, in spite of a negative Wassermann reaction, that some trouble may not develop later in life.

What shall we do in such cases and what particularly shall we do if, from a general examination of the patient, we carry away the impression that, while free from the danger of infection, the man is not a good risk? Under these circumstances, we must refuse all personal responsibility, leaving the assumption of the responsibility to the prospective wife.

Here is a case in point. About five years ago a man came to me for examination; he came with his fiancée. He had contracted syphilis ten years previously, received irregular treatment by mouth, off and on. For five years he had had no symptoms of any kind. He *considered* himself cured, but wanted to know, and his fiancée wanted to know, whether he really was cured. There were no symptoms of any kind and the Wassermann was negative. Nevertheless, I could not give him a clean bill of health. I noticed what seemed to me a slowness in thinking and just the least bit of hesitation in his speech.

I told the girl (the man was thirty-five, she was thirty-two) that I could not render a definite decision in the matter, that everything might be all right, and then again it might not; but, that the question about children she would have to decide definitely, once for all, namely, that she was not to have any children. She was fully satisfied so far as that part was concerned; she said she herself objected to children and did not intend to have any and knew how to take care of herself. All she wanted to know was, whether she was in danger of being infected. I told her no, but that in my opinion there was some danger of her husband developing general paresis or locomotor ataxia.

The girl had been a teacher for about twelve years, and she was so sick at heart of the work, was so anxious for a home of her own, that she decided to take the risk. And they got married. The marriage remained childless. The man developed general paresis (softening of the brain) three years later and died about a year afterward. The woman, now a widow, I understand, is not sorry for the step she had taken. This shows what things our social-economic conditions and our moral code are responsible for.



## A FEW FACTS ABOUT SYPHILIS

1. *Syphilis*, also known as "pox," "blood disease," etc., is a serious contagious disease, slowly acting, which may affect all parts of the body.

2. *Syphilis* is caused by a minute germ, which can only be seen with a powerful microscope, which circulates through the blood and attacks every organ in the body if unchecked by proper treatment.

3. *Syphilis* is usually but not always transmitted by sexual intercourse.

4. *Syphilis* always begins by the germs entering the body through a break or abrasion of the skin or of the lining of the mouth or sexual organs. This abrasion may be so small that it cannot be seen.

5. *Syphilis* always begins with the local sore which develops at the spot where the germs penetrate. The germs grow slowly at first and from two to eight weeks may elapse before the sore appears. This initial sore, pimple or ulcer is usually painless and is called a "hard chancre" or the first stage.

6. *Syphilis* gradually develops after the chancre has apparently been cured. Skin rashes, sores in mouth, swelling of glands, fever, deep pains in bones, sore throat, falling out of hair, are some of the most frequent symptoms of this stage. Any one or more of these symptoms may occur. This is known as the second stage.

7. *Syphilis*, when untreated, may appear to be cured spontaneously after the second stage, but it is not. It remains in the blood and the deep parts of the body. The germs will lie quiet sometimes for years and then suddenly produce the terrible effects known as the third stage. They will slowly destroy the brain, nerves, bones, blood vessels, etc. Locomotor ataxia, paralysis, paresis or softening of the brain and some forms of apoplexy, are a few of the later effects of untreated syphilis. They may come on as late as twenty years after the original "chancre," but are all part of the same disease and caused by the same germs.

8. *Syphilis*, when uncured, may also be transmitted to unborn children through either father or mother. It is one of the greatest causes of miscarriages, children being born dead, and of

---

\*Massachusetts State Board of Health.

weak, sickly children. When born alive these babies often spread the disease, as their syphilis is very contagious.

9. *Syphilis* is extremely contagious in the first and second stages.

10. *Syphilis* is most easily cured in the first or "chancre" stage, is readily curable in the second stage, and may be greatly improved in the third stage.

11. *Syphilis* in all stages requires long thorough treatment by special remedies to insure a cure. Certain laboratory tests, especially the one known as the "Wassermann Test," are of great assistance in determining when the disease is cured.

12. *Syphilis* can be accidentally transmitted during the first and second stages and from babies with congenital syphilis in a great variety of ways, by kissing, by articles accidentally contaminated with secretions from the sores, as towels, pipes, drinking glasses, eating utensils, etc., etc.

13. *Syphilis* affects most public and clandestine or secret prostitutes. It can best be prevented by avoiding all chance of infection.

14. *Syphilis* can be cured, but not in a week or a month at any stage. A person with syphilis must be sure he is getting competent treatment and then stick to it a long time, until the "blood tests" and his physician say he is cured.

#### PERSONAL ADVICE

1. Do not forget your disease may be communicated to others by contact other than sexual intercourse.

2. It may be transmitted by any of the secretions of the body, but more especially by blood or blood serum oozing from raw mucous surfaces, such as cracked or sore lips, mucous patches in the mouth and throat, discharges from syphilitic ulcers and sores.

3. Never permit the slightest opportunity for other persons to come in contact with any of these secretions.

4. To avoid this, follow these rules:

(a) Until the acutely infectious stage is passed and permission is given by the physician, you should have individual drinking cups and eating utensils. These should be sterilized by boiling after each use. Never use public drinking cups.

(b) Tooth brushes and containers of pastes, powders or



mouth washes used in caring for the teeth should be kept in separate containers or compartments where no opportunity for contact with others is possible. Brush the teeth night and morning (or better, after each meal) and keep mouth clean.

If you have bad teeth have them attended to by a dentist. Be fair to him and his next patient by telling him you have syphilis, so he may take precautions and not infect others.

(c) Use no razor or other articles used in shaving except your own, and permit no other person to use your shaving outfit. Shaving in a public barber shop is prohibited for one year after beginning of infection.

(d) Basins, lavatories and bathtubs used should be washed out thoroughly with soap and hot water after each use by you. Separate basins are to be used wherever possible. The use of public bathtubs is prohibited.

(e) You should use individual towels.

(f) Handkerchiefs and clothing, especially underclothing, which may be soiled by secretions, should be laundered separately, or if impracticable, they should be immersed in boiling water or an approved antiseptic solution, as advised by the physician, before being added to other laundry.

(g) All dressings of sores or ulcers must be burned or otherwise destroyed. Never leave them where they are accessible to flies.

(h) Never kiss others or permit them to kiss you.

(i) Sleep alone and practice continence. Your physician will tell you good habits improve your physical tone and hasten recovery.

(j) Follow your physician's advice, and do not cease treatment until by every known laboratory method he has satisfied himself of your recovery, and assures you there is no longer danger of your transmitting the disease.

(k) *Do not be led astray by promises of hasty or permanent cure by falsely advertised remedies. Cheap cures make miserable lives and expensive funerals.* You gain nothing but bitter experience by deceiving yourself, and you risk the injury of those nearest and dearest to you. Play fair with yourself and with others.

5. *Consult your doctor at least once a month for two years.*

## CHAPTER XX

### GONORRHEA AND THE OTHER VENEREAL DISEASES

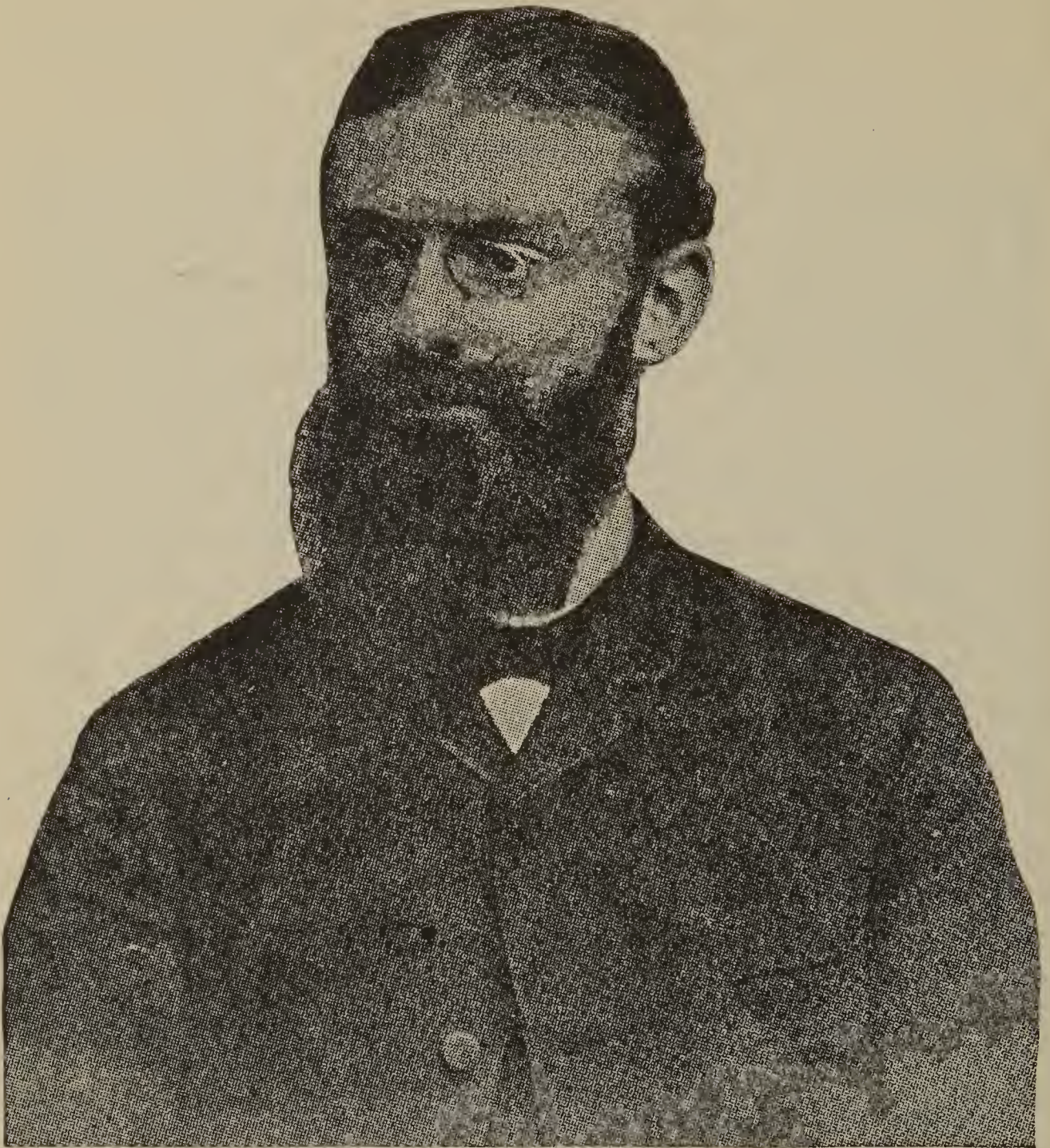
#### GONORRHEA

(*Clap, "A Dose," Etc.*)

**HISTORY.** There are accounts in the Bible, and in the old writings of Egypt which evidently refer to this disease. At any rate it was well known to the classic writers on medicine, both before and after Christ. The name given to it early in our era, means a "flow of semen," the man who christened it supposing the discharge of matter (or "pus") was really the seminal fluid of the male. (How he accounted for it in the female, history does not tell us.) By the time of the Middle Ages, traveling for commerce and other reasons had become much more common, and the doctors of those far-off days were quite familiar with the signs of the disease, which knowledge was made necessary for them by the universal spread. About a century and a half ago, an English surgeon experimented on his own person by taking some discharge from a man with gonorrhea and putting it under the skin. Unfortunately the man had syphilis as well as gonorrhea, and the Englishman breaking out with syphilis in due time naturally claimed the diseases were identical. The confusion thus started was not cleared up for many years. Because we now know that gonorrhea is not a flow of semen, many doctors prefer to use the word "urethritis," meaning thereby inflammation of the conduit for the urine.

**Cause and Recognition of the Disease.** In 1879 a German scientist proved that gonorrhea is caused by a microscopic germ, and it is interesting to note that this was three years before the famous discovery of the germ which gives rise to consumption. Its name is the gonococcus, and since "*kokkos*" is Greek for berry, we expect to find them round in shape, and this is the case; in size they are excessively small and are only to be seen with a powerful microscope. Unlike the pale spiral through which syphilis originates, these little plants are unable to move.



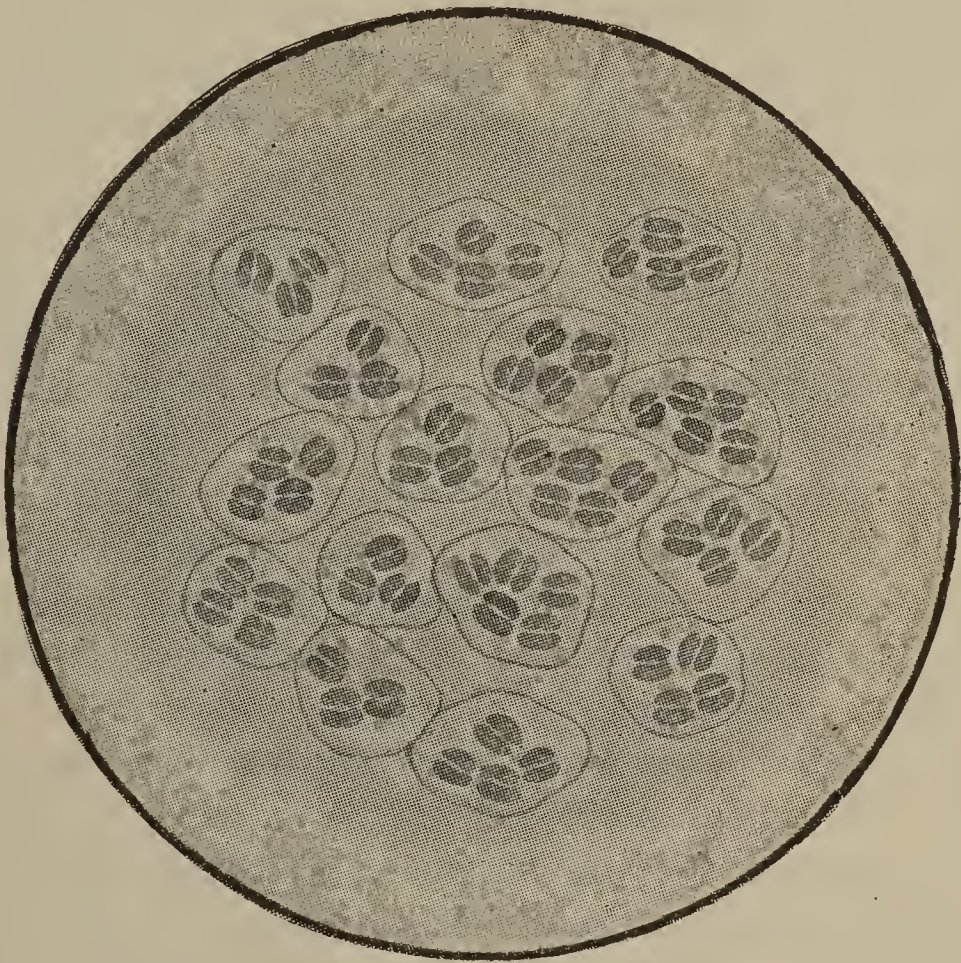


ALBERT NEISSER

In 1879 discovered the minute vegetable germ (the gonococcus) which causes gonorrhea.



The only positive means of recognizing the disease is to identify the cause under the microscope. Accordingly a drop of the discharge being placed on a little glass slip, is colored with a certain dye; if the germs are present they will be seen either loose or inside the little round masses (or "cells") with which the discharge swarms. They may be seen singly, but are usually in twos, with the concave edges flattened somewhat where they come together, hence look a little like a coffee-bean, but by no means so much so as many authors would have us believe.



GONOCOCCI, THE SMALL VEGETABLE GERMS WHICH CAUSE GONORRHEA

Note that they are arranged in pairs, and look slightly like a coffee-bean. In this specimen most were within the cells.

**Manner of Infection.** This is practically always during the sexual act, though the disease can be transmitted by use of syringes, sponges and so on, which have been used not long before by diseased individuals. It is sometimes the case that by carelessness in this respect, nearly all the girl inmates of orphan-asylums, children's hospitals, etc., become infected.

**Course of Disease.** Here things happen more quickly than is the case with syphilis: In three to five days, seldom over a week or two, there is itching and a sensation of warmth about



the opening of the urinary channel. Scalding or burning on making water soon follows; then the discharge appears, at first thin and watery, it soon becomes thick, yellowish or greenish, in severe cases streaked with blood. As the disease travels back along the urinary canal, the pain on passage of urine becomes excessive, so much so patients sometimes faint from the agony. Sleep is often disturbed for men by the male organ becoming hard and bent and very painful. All these manifestations gradually subside with time, and in ten to fourteen days are no longer annoying. The discharge, however, still continues, but in a month or two again becomes thin or watery. Finally it disappears completely, or keeps up indefinitely by escape of a thin, milky fluid, the "gleet."

**Frequency and Prevention.** Many years ago a New York doctor estimated that 80 per cent of all men had gonorrhea at the time, or had had it previously. This figure is thought to be rather high nowadays, and it is supposed that 50 or 60 per cent is nearer correct, at least for the U. S. It is generally agreed the disease is much more common than syphilis, say four—or five times more, this would make the average frequency somewhere in the vicinity of 50 per cent. For women the figures vary—the majority of prostitutes have it, while very few cases are found in other classes of this sex.

Obviously the way to prevent infection with gonorrhea is to abstain from sexual intercourse unless married. Since a good proportion of mankind does not see fit to adopt this course, it remains to find what can be done to lessen the danger. (Here again we are not concerned with the moral or ethical aspect of the case, merely the medical one.) It has been found that injection of a solution of some of the drugs made of silver, if done within a few hours after a suspicious connection is often successful in preventing development of the disease. This is to be carried out by a duly-qualified physician. Some idea of the benefits may be had from the fact that in the U. S. army, about 12 to 13 per cent of the enlisted men (in 1907), required treatment for this affection. In 1911, the preventive treatment was started and by 1915-16, the per cent of men needing treatment had fallen over one-half (5 to 6 per cent).

**Treatment.** For this a reputable physician must be consulted. The affection is much too serious to be cared for by the

patient taking some of the quack remedies advertised on walls, or something recommended at the corner drug store. In short it consists in flushing out the canal with appropriate agents at regular intervals, and faithfully kept up. The entire sexual tract in both sexes has myriads of pouches and sacs opening into it, most of them—while microscopic in size—large enough to hide innumerable germs, so long as these hidden deposits exist there is danger of a fresh outbreak. So mere stoppage of the discharge is no sign treatment is to be discontinued, though in this point be guided by your doctor. Persistence is the keynote.

**Consequences of the Disease.** Physicians who are familiar with the ravages of syphilis and of gonorrhea, sometimes declare that if they had their choice between the two diseases, they would prefer infection by syphilis. The treatment takes an incomparably longer time, but a cure is generally obtained—even with the old-fashioned mercury and potash. In gonorrhea, on the other hand, the ravages produced by the inflammation are sometimes beyond the reach of drugs.

We have seen how small the germs of the disease are, every drop or two of the discharge contains hundreds and thousands, and the discharge is excessively dangerous. All dressings soiled with it must be burned at once. Especially should great care be taken to prevent any getting into the eyes; the inflammation which results causes serious disturbance of sight, even total blindness.

Troubles in the joints are often met with, the germs being carried there by the blood. The joints most often affected are the knee and ankle—and in the arm, the elbow, wrist and fingers; usually only a single joint. Various degrees are to be found—one like rheumatism, sometimes ending in partial or total crippling of the joints in the hand, and for bookkeepers, violinists, and other occupations depending on the hand for a livelihood, putting a stop to such activities. Or, there may be “water on the joint,” and occasionally abscesses with great damage to the gristle with permanent stiffness. A curious thing is that the joints may be severely diseased, even where the gonorrhea itself seems rather mild.

Sometimes the poison carried by the blood affects the joints only, at others it attacks the lining of the heart and that of the chest. In the latter case there may be sudden death from “heart



disease" or crippling of that important organ for the balance of life.

A common result of gonorrhea in the male is what is known as a "stricture"—that is to say, a narrowing of the channel by which the urine escapes from the body. As a consequence of the inflammation, little sores form, now everybody has noticed how a scar after a cut or burn, as it heals grows smaller, wrinkling up the flesh. The same thing happens in the urinary canal, it becomes more and more difficult to pass water, until at length it escapes drop by drop, and if nothing be done stops altogether. The reservoir for the urine—the bladder—grows more and more full, and unless emptied will burst into the abdomen. If taken in time the narrowing can be stretched by a physician passing instruments, but if not treated till late it is necessary to pass a knife and cut through the obstruction. Incidentally, as a consequence of the damming-up, the kidneys may become diseased, and irreparable—even fatal—damage ensue.

In 10 per cent approximately of all cases, the little cap to the testis is attacked by the disease. The pain is very great, also the swelling—both lasting for several days—but this is trivial compared to the fact that such attacks may block up the tubes by which the seminal fluid is discharged, and in turn produce inability to have children (sterility).

As shown in the chapter on the Anatomy of the Reproductive Organs the urinary and sexual organs of the female are separated, not joining as in the other sex. Accordingly we find serious results to follow on part of the female generative organs. When the germs of gonorrhea get into the tubes from the womb to the egg-gland (ovary), an abscess often follows. The great majority of such abscesses are due to gonorrhea, and it is amazing to what size they may grow: The tube ordinarily about the size of a slate pencil enlarges until it sometimes holds a quart or more of matter. Of course, there is often no hope for this state of things save for the abdomen to be cut open, and the diseased tube or tubes removed. Even where this extreme condition is not reached, the channel in the tubes becomes stopped up, and preventing the eggs escaping into the womb, causes sterility once more.

Women are also liable to joint troubles, but generally speaking, the lining of the "neck" of the womb is most diseased. The

ovaries and the lining of the abdomen may be affected as well, with constant pain and a life of invalidism and painful "monthly periods."

One of the saddest consequences of the disease in the woman is that should she while suffering from it, give birth to children, the eyes of the baby become diseased on the way, and unless promptly and thoroughly cared for, blindness results. It is asserted that over one-half of people who are said to be "born blind" are so from this involvement of the eyes. Fortunately steps have been taken by most of the states to require the attendant at childbirth—whether physician or midwife—to adopt certain simple precautions by which this deplorable calamity can be prevented.\* But a short time since a midwife in Chicago, who was proved to have neglected this precaution was heavily fined.

So it can be seen the old saying that "Clap is no worse than a bad cold" gives a mighty poor idea of the distressing complications to which the disease renders one liable. Nor does that other saying to the effect it can be cured by "10 cents' worth of bluestone," come anywhere near the truth as thousands of human beings have found to their sorrow.

A French author writes that he has known many instances where an unexpected attack necessitated absence from a competitive examination and ruined the subsequent career of the unlucky possessor. Finally, while a second attack of syphilis is one of the rarest possibilities, a given individual may have gonorrhea a number of times.

#### A. CORBETT SMITH ON GONORRHEA\*

The serious nature of gonorrhea lies more particularly in the fact that unless adequate treatment is applied in the early stages, and so soon as possible after infection, it is liable to become chronic and so extremely difficult to cure. It may, for instance, remain quiescent in the system for years, to break out again, long after the patient has imagined himself to be fully cured, in a variety of complications of which ophthalmia and blindness are particularly frequent and serious examples.

---

\*Application of a 1 per cent solution of lunar caustic (silver nitrate), as soon as possible after birth to the babies' eyes.

\*By A. Corbett-Smith.



On the other hand, if remedies are promptly forthcoming upon the immediate appearance of the primary symptoms, or, better still, upon the mere *suspicion* that infection has been acquired, and if the treatment be continued in strict accordance with medical advice, there is comparatively little danger.

One definite example may here be given of the retention by the gonococcus or microbe of its vitality over a period of years. A man has contracted gonorrhea. Under medical advice he applies the necessary remedies, and after a time, with the disappearance of all symptoms, he discontinues them under the belief that he is cured. At the end of, say, two years, he marries, and the gonococci, which all this time have remained dormant in the urethra, are transferred to the virgin vagina and are there rejuvenated. The wife becomes infected and the husband becomes reinfected with his own gonococci. Under these circumstances he is practically certain to attribute the blame to his wife, and it needs no effort of the imagination to visualize the serious complications which may thereby ensue.

I have quoted this particular example because it must supply some explanation of the extraordinary number of cases of infection amongst married women. Despite the hysterical assertions of the more irresponsible section of the Women's Movement, I refuse to believe that any man, save a callous criminal, will knowingly infect his wife with such a disease. For herein lies its insidious nature. A man may adopt all reasonable precautions, and yet he may not persist in them for a sufficient length of time. Careless he may be, but not necessarily criminal, for criminality implies the knowledge and the will. And yet his carelessness may be the cause of infinite suffering.

Dr. Johnstone states that a large proportion of the operations performed at women's hospitals are rendered necessary by gonococcal infection, that the proportion is, in fact, as high as 25 to 50 per cent of the major operations performed. More serious still, from the point of view of our racial development, is the estimate that about one-third of the childless marriages are due to gonococcal infection in the female; for gonorrhea is one of the most potent causes of sterility.

Another fact which is not properly appreciated is that a subject may become infected with the disease merely through contact with infected articles. A child may, for instance, contract

gonorrheal ophthalmia from the infected touch of a parent's fingers, or from the mother during parturition. Comment upon such a point is wholly superfluous, for it will readily be seen how extensive is the suffering which may be inflicted. And the disease might so easily be avoided. *It depends upon the individual.*

The literature bearing upon syphilis and its treatment is most extensive, while gonorrhea is, comparatively speaking, ignored. And yet Dr. Prince A. Morrow has stated that "in the case of gonorrheal infection the individual risks the wife is made to incur are much more serious than those following syphilis. The infection may invade the cavity of the uterus and ascend to the annexial organs, causing salpingitis, ovaritis, peritonitis, etc., destroying her conceptional capacity and rendering her irrevocably sterile, to say nothing of the resulting dangers to life and the frequent necessity of surgical operations to remove her tubes and ovaries."

Indeed, when no more than a cursory consideration is given to the question the figures and facts which present themselves are simply appalling, incredible. It is as though we were asked to believe that the Great Plague of London, when one in every four fell dead, were actually now raging, but in secret and behind closed doors. To read an authoritative statement such as "Gonorrhea is the most widespread and universal of all diseases in the adult male population, embracing 75 per cent or more," or that of Næggerath, and then to sit still for a few minutes with closed eyes, is to conjure up a mental picture of misery and suffering worthy to find a place in "Il Inferno" of Dante.

One could fill pages with such quotations, with heart-breaking instances of innocent sufferers; of women deprived, perhaps from their very wedding night, of their dearest privilege in life; of ruined homes; of babes doomed to a lingering death in life; of—but the brain refuses to frame the sentences, it is all too hideous. At the outset one may dispose oneself to write calmly and dispassionately of these things, to discuss them in the cold light of science and reason; but human feelings must assert themselves when all else is swept aside and forgotten save only the figure of a little child who kneels with imploring, upraised hands to the gaunt spectre of this loathsome disease.

One is indeed almost tempted to agree with Miss Pankhurst's assertion that gonorrhea has not been brought prominently



to public attention because the medical profession hesitate to publish the appalling facts. And yet this would not account for the scarcity of purely medical literature (apart from short papers) upon the subject. Statistics in any country are practically non-existent; but of this fact the explanation is a simple one.

When a man contracts gonorrhea it is fairly certain that he will consult, not a properly qualified medical man, but a neighboring druggist. The druggist, or quack, will probably sell him (at an exorbitant price) a box of capsules, or some drug possessing some curative properties, and the man will be temporarily cured. In the case of syphilis a man is simply compelled sooner or later to seek medical advice, or go into hospital. Hence, in our Navy and Army at any rate, and in our hospitals, the case is duly recorded.

Have I said sufficient to show the meaning of gonorrhea to the individual and to the community? And then I recall a remark once made to me by a driver of the Field Battery in which I served. "Why, sir," he said, "a man isn't a man until he has had the 'clap' ". And, to our shame, that is the attitude of thousands of men. Who can wonder that women are uniting to insist that such things shall cease? And so I force myself to continue, to set down facts still more direct, that men shall realize (so far as this may serve) the misery and suffering of which they may be the agents so long as they adopt such an attitude, so long as they consider gonorrhea a trivial thing, a lesser evil than a severe cold.

Speaking in a broad general sense it is found that there is a distinct difference in the pathology of the disease as it affects the sexes. It lies in the fact that in the male the incidence of gonorrhea is more visible, easily diagnosed, but it is also attended by a far greater degree of pain and discomfort than in the female. On the other hand, in the female, it is very frequently non-apparent; there is often considerable difficulty in distinguishing possible symptoms from those of other disorders; there is comparatively little, if any, discomfort; but, finally, the resultant effects are often of the most serious character, involving, as remarked above, sterility and acute abdominal diseases.

Having regard, then, to this tolerant attitude adopted by so many men towards gonorrhea it only remains that the facts must be driven home into the public mind still more emphatically.

And in attempting the task, I cannot do better than follow the scheme adopted by Fournier.

In the first place, in the case of the male, the initial treatment, from the fault of either patient or doctor, may not prove efficacious, and the discharge from the urethra may persist for some considerable time.

Secondly, the discharge may fail to dry up completely and so may generate a chronic discharge called *gleet*. This is certainly one of the most difficult to cure. It involves a prolonged and painful treatment; it is liable to frequent recurrences, and may indeed after all prove refractory to every kind of treatment.

I have referred to the liability of gonorrhea developing into a chronic complaint, and have given instances of ophthalmia and blindness, and of the serious disorders which may be inflicted upon innocent women through the, often, reckless carelessness of an infected husband. Perhaps most sad and cruel of all, I have spoken of the helpless babe contracting at birth some form of the disease. Surely no more potent argument than this last is needed to secure a full consideration of all the facts, and the determination on the part of the individual and the community to stamp out gonorrhea from civilization.

Is it realized what sterility (especially when it is apparently inexplicable) means, to the individual, apart from the community? To the husband or wife who reads these lines it may mean nothing save a deliberate intention to refrain from procreation. With such a one I am not immediately concerned. But what of the young wife to whom the gift of a child would prove the dearest pledge of her love for her husband? Ignorant of the cause, she undergoes the humiliation of childlessness. In vain she listens for the tiny voice of her dream-child crying to come to her; the patter of "little feet along the floor." And so may come gradual estrangement between husband and wife; the break between two hearts which, a few short years before, had seemed to join in a lifelong union; and at last the dissolution of a home which had never been a home. And all because, perhaps, of one single, seemingly trivial incident in the husband's life of years ago—a birthday dinner, a visit to a music-hall, a little half-hour in a woman's company. And the blame attaches to the wife, not to the husband!



## OPHTHALMIA AND BLINDNESS

Here are a few facts and figures concerning the prevalence of a form of *preventible* blindness—Ophthalmia Neonatorum—which, as already remarked, is a *result of gonorrheal infection*.

(1) Ophthalmia neonatorum is by far the most common cause of blindness in children.

(2) It was estimated that, in 1918, about 7,000 persons in the United Kingdom had lost their sight from ophthalmia neonatorum.

(3) In the United States it was estimated that, of the total cases of blindness under one year, over 25 per cent were due to ophthalmia neonatorum.

(4) In New York it was calculated that of *all* children born 1 per cent suffer from ophthalmia during the first few days of life, and, of these, one in twenty is blinded or partially blinded as a result of the disease.

(5) In the various blind asylums and schools the percentage of cases due to ophthalmia neonatorum varies from 27 to 75 per cent, the average being about 35 per cent.

From these and other data the conclusion that ophthalmia neonatorum accounts for upwards of 10 per cent of all cases of blindness can hardly be termed an exaggeration.

And yet it is seriously asserted that sexual disease, and its sequelæ, is the "retribution of sin." May I invite the attention of those who labor under that delusion to the above details? If gonorrhea is stamped out of existence ophthalmia neonatorum will also cease to exist.

Two more specific divisions in possible effects:

The most common and also the most serious of all such results is found in *stricture of the urethra*. "Sometimes," says Fournier, "it is amenable to mild forms of treatment, but it is often only cured by surgical operation. Further, a neglected stricture may become the point of origin of grave complications, affecting the prostate, bladder and kidney. Then everything is possible, even death, which is not rare in such cases."

And, lastly, there are frequently to be found definite and permanent *affections of the joints* resulting from gonorrheal rheumatism. Here again there may be no more than a permanent stiffness, say of the fingers; but many cases are upon record of a total disablement of various limbs.

## MARRIAGE AND GONORRHEA\*

For a man or a woman who has once suffered from gonorrhea or syphilis to enter matrimony without having secured a competent physician's opinion is a great responsibility. And a great responsibility rests upon the shoulders of the physician who is called upon to give such an opinion. For, a wrong decision—a wrong decision either way—that is, permission to marry when permission should not have been granted or refusal to give permission when permission should have been granted—may be responsible for much diseases: disease of the mother and of the offspring. It may even be responsible for death.

There is no easy, short road to a positive opinion. It requires a thorough, painstaking examination at the hands of an experienced physician, one thoroughly familiar with all the modern tests, to tell whether it is safe for a man who once suffered from venereal disease to enter the bonds of matrimony. Sometimes one examination is not sufficient, and several examinations may be necessary; but, the opinion of a conscientious, experienced physician may be relied upon, and, if all men and women who once suffered from venereal disease would seek for, and be guided by, such an opinion, there would be no cases of marital infection, there would be no children afflicted with gonorrheal ophthalmia, there would be no cases of hereditary syphilis.

I firmly believe that a time will come when all venereal diseases will have disappeared from the face of the earth. But, until that time comes, it would be for the benefit of the race and of posterity if people had to present a certificate of freedom from transmissible venereal disease as a prerequisite to a marriage license. Custom is often more efficient than law, and, if a premarital examination should become a universal custom (and there are indications in this direction) no law would be needed.

**When May a Man Who Had Gonorrhea Get Married?**

For a man who once suffered from gonorrhea to be pronounced cured and a safe candidate for marriage, the following conditions must be present:

1. There must be no discharge.
2. The urine must be perfectly clear and free from shreds.
3. The secretion from the prostate gland, as obtained by

---

\* Dr. William J. Robinson in *Woman: Her Sex and Love Life*. Critic and Guide Company, New York City. (See advertisement last page.)



prostatic massage, and from the seminal vesicles, as obtained by "milking," or "stripping," the vesicles, must be free from pus and gonococci. To make sure, it is best to repeat such examination at three different times.

4. There must be neither stricture nor patches in the urethra.

5. What we call the complement-fixation test, which is a blood test for gonorrhea similar to the Wassermann blood-test for syphilis, must be negative.

Referring to conditions 1 and 2, it sometimes happens that the patient has a minute amount of discharge or a few shreds in the urine, and I still permit him to marry; but this is done only after the discharge and shreds have been repeatedly examined and have been found to be catarrhal in character and absolutely free from any gonococci or other germs.

It sometimes happens that a patient comes to me for an examination a few days before the date set for the wedding. I examine him and find that he is not in a safe condition to marry, and so advise him to delay the wedding. Sometimes he follows the advice, but in some cases he is unable to do so. He claims the wedding has been arranged, the invitation-cards have been sent out, and to delay the wedding would lead to endless trouble and perhaps scandal. In such cases I, of course, assume no responsibility; however, I do advise the man to use an antiseptic suppository or some other method that will protect the bride from infection for the time being, while he, the husband, has an opportunity to take treatment until cured. Of the many cases in which I advised this method, I do not know of one in which infection has taken place.

**When May a Woman Who Once Had Gonorrhea Be Permitted to Marry?** In the case of a woman the decision may be harder to reach than in that of a man. Of course, the urine must be clear and the urethra must be normal; however, we cannot insist that there must be no discharge. This, because practically every woman has some slight discharge; even, if not all the time, they at least immediately prior and subsequent to menstruation. Of course, the discharge must be free from gonococci and pus. Also the complement-fixation tests must be negative. But, even so, we cannot be absolutely sure, because gonococci may be hidden in the uterus or in the Fallopian tubes.

Here, we have to go a good deal by the history given us. If the woman, during the course of the gonorrhea, had salpingitis, that is, an inflammation of the Fallopian tubes, then we can never say positively that she is cured; all we can say, at best, is, presumably cured. And, further, if she has no pains in the uterine appendages, either spontaneous or on examination, and, if several examinations made within a day or two following menstruation are negative, then we may assume that she is cured. It is important, though, that this examination be made on the last day of menstruation or on the first or second day following; for there are many cases in which no pus and no gonococci will show in the intermenstrual period, but will appear on those particular days, because, if the gonococci are hidden high up, they are likely to come down with the menstrual blood and portions of mucous membrane that are shed during menstruation.

At best, it is a delicate problem, so that whenever there has been the least suspicion that the woman may harbor gonococci I have always advised (as is my custom, to be on the safe side) and directed the woman to use either an antiseptic suppository or an antiseptic douche before coitus. With these precautions adopted, I have never had an accident happen.

**The Question of Probable Sterility.** Thus far I have considered the problem of marriage from the standpoint of infectivity. But, we know that, besides the effect on the individual, gonorrhea has also a far-reaching influence on the race; in other words, that it is prone to make the subjects—both men and women—sterile. And a candidate for marriage may, and often does, want to know whether, besides being noninfective, he or she is capable of begetting or having children.

In the case of man, the problem is, fortunately, a very simple one. We can easily obtain a specimen of the man's semen and determine, by means of the microscope, whether it contains spermatozoa or not. If it does contain a normal number of lively, rapidly moving spermatozoa, the man is fertile, regardless of whether he ever had epididymitis or not. If the semen contains no spermatozoa, or only a few deformed or lazily moving ones, then he is sterile.

In the case of woman, it is *absolutely* impossible to determine whether the gonorrhea has made her sterile or not: because there is no way of expressing an ovum from the ovary. The woman



may not have had any pain or inflammation in the Fallopian tubes, and yet there may have been sufficient inflammation to close up the orifices of the tubes. On the other hand, she may have had a severe salpingitis on *both sides and still be fertile*. Nor is there any way of telling whether the ovaries were so involved in the process as to become incapable of generating healthy ova, or any ova at all. In short, there is absolutely no way of telling whether a woman is sterile or fertile—we can only surmise. And our surmise in this respect is liable to be wrong just as often as right. The only way the question can be decided is by experience. If the prospective husband is willing to take a chance, well and good.

While just as many girls marry as do young men, still, in practice, we always shall have to examine an incomparably larger number of male than of female candidates. This is due, not only to the fact that an incomparably larger number of men suffer from venereal disease, but also because very few women will confess to their fiancées that they ever entertained antematri-monial relations and—what is still worse—were infected with venereal disease. This, of course, is owing to our double standard of morality, which looks upon as a trivial or no offense in the man what it condemns as a heinous crime in the woman. I have known hundreds of men who confessed freely to their fiancées that they had had gonorrhea, but I have known only two girls who made a confession of the fact to their future husbands. They got married, however, and lived happily with their husbands ever after.

#### A FEW FACTS ABOUT GONORRHEA\*

1. *Gonorrhea* is one of the most common of the highly contagious diseases and is also known by many other names, the most common being “clap,” “a dose,” and “a strain.” “Gleet” is the chronic form of the disease.

2. *Gonorrhea* is caused by a minute germ called the “gonococcus,” so small it can be seen only under the microscope.

3. *Gonorrhea* is nearly always spread by sexual intercourse, but may be spread by accidental contact with the gonorrheal discharge or pus. The most serious forms of this accidental infection are infection of the eyes, when it often causes blindness, and

---

\*Massachusetts State Board of Health.

infection of the "privates" of little girls and girl babies, often from contaminated bedding.

4. *Gonorrhea* is a serious disease, and not a trivial annoyance "no worse than a bad cold" as is often ignorantly said.

5. *Gonorrhea* is always a serious disease because:

(a) It is occasionally directly fatal.

(b) It has a long and serious list of complications which may come on long after the original "dose" seems to be entirely cured.

(c) In millions of cases it is transmitted to wives by husbands who have not been thoroughly cured and thereby produces long drawn-out female disease curable only by serious operations.

(d) It is the greatest cause of sterility or inability to have children, due either to infection of the wife or gonorrheal inflammation of the testicle in the husband.

(e) It is the greatest of all causes of blindness in babies and is the cause of more than 10 per cent of all blindness.

6. *Gonorrhea* has many distinctly recognized complications. The most frequent and important are:

#### IN THE MALE

Stricture.  
Inflammation of the bladder.  
Inflammation of the testicle.  
Abscesses of the groins.  
Abscesses of the kidneys.  
Rheumatism.  
Sterility.

#### IN THE FEMALE

Inflammation of the womb.  
Inflammation of the ovaries.  
Inflammation of the tubes.  
Local or pelvic peritonitis.  
Inflammation of the bladder.  
Rheumatism.  
Sterility.

7. *Gonorrhea* is one of the most deceptive of all diseases. It is easy to think it is cured when really only the discharge has stopped, while the gonococcus is still present, able to do extensive damage to the patient and to infect others.

8. *Gonorrhea* affects practically all prostitutes sooner or later, both the public and the clandestine or secret prostitutes.

9. *Gonorrhea* is in practically all instances a curable disease if treatment is begun early, competently given, faithfully followed out by patient, and *kept up* sufficiently long. The time necessary will almost never be less than one month and may take many months.



10. *Gonorrhea* may be caught more than once; one attack does not produce any protection against later infection.

11. *Gonorrhea* is a preventable disease, but the only sure means of prevention is in avoiding exposure. *Don't take a chance.*

#### PERSONAL ADVICE

1. Never forget your disease is infectious, or "catching," by other means than by sexual intercourse.

2. It may be transmitted to the eyes and private organs through contact with the discharges from the urinary canal.

3. Never permit the slightest opportunity for other persons to come in contact with these discharges, or with anything contaminated by them.

4. To avoid this, follow these rules:

(a) Always wash the hands thoroughly with soap and hot water after every urination or other handling of the diseased organs. Remember, by one such act of carelessness you may carry the infection on your fingers to your own eyes and expose yourself to the risk of becoming blind.

(b) After washing the hands, do not merely rinse the basin or lavatory; wash it thoroughly with soap and hot water, and preferably follow by an antiseptic solution of known strength, as advised by your physician.

(c) The same care should be used in washing out bathtubs. The use of public bathtubs is prohibited. Never use any bathtub immediately preceding another person.

(d) Always have your individual towel. The use of the common towel is a prolific cause of gonorrheal infection of the eyes. Don't expose others to the risk of blindness.

(e) Protect the clothing and underclothing against soiling by use of proper dressings. Soiled clothing should be laundered separately; or, if impracticable, soiled portions should be immersed in boiling water or an approved antiseptic solution before being added to other laundry.

(f) All dressings must be burned or otherwise destroyed. Never leave them where they are accessible to flies.

(g) Exercise care to prevent soiling of toilet seats by discharges.

(h) Sleep alone. Above all, have no sexual intercourse

until you *know* you are well. You will not wish to be charged with causing the loss of health, or possibly the death, of any person. Besides, your physician will tell you, it retards your own recovery.

(i) Follow your physician's advice, and do not cease treatment until by every known laboratory means he has satisfied himself of your recovery and assures you there is no longer danger of your transmitting the disease.

(j) *Do not be led astray by promises of hasty cure by falsely advertised drug-store remedies. Cheap cures make miserable lives and often expensive funerals.* You gain nothing but bitter experience by deceiving yourself, and you risk the injury of those nearest and dearest to you. Play fair with yourself and with others.

5. Consult your doctor at least once a week for the first three months.

#### OTHER VENEREAL DISEASES

Sores on the external genitalia are of two types—one, the soft sore found in either sex; the other balanitis, confined to the male.

**“Soft Sore” or Chancroid**, so called because it resembles the chancre of syphilis, is a common affection, next so after gonorrhea. It is due to a vegetable germ discovered some thirty-two years ago by a French observer, but unlike the one of gonorrhea, this is rod-shaped. These sores are always produced by personal contact with another individual, and appear in a few days after such contact. Very small abscesses are the first evidence, bursting soon they leave small sores with ragged edges and a free yellow discharge. As their name implies they are not hard like the first stage of syphilis; on the other hand, they are painful, and usually more than one can be found.

The preventive measures are the application of a calomel ointment as for syphilis.

Some years ago medical students had to memorize a long list of differences between the “hard” and “soft” sores, but as the old saw goes: “All signs fail in dry weather.” At present with improved tests the soft sore is recognized by finding the vegetable germ. Both hard and soft sores may be present at the same time, and formerly it was very unsafe to trust to the appearances shown on inspection.



All necessary in taking care of the soft sore is to keep it clean, and apply the powder or salve advised by one's doctor.

The blood is not infected, neither is the body in general poisoned. When a soft sore heals that is the end of it, save for its cause it acts like any other little sore, that from poison ivy for instance. To be sure before this happy event takes place, abscesses are apt to form in one or both groins, which are very painful, and a good many—about 25 per cent—have to be opened by the physician.

**Balanitis.** The head of the male organ, having more or less resemblance to an acorn, is so called in Greek, and from it comes the name for sores with more or less mortification of the flesh.

This uncommon type which has only been known for a few years past, is caused by still another type of vegetable germ—a curved rod with the ends pointed.

In men with long foreskins, after impure connection, small white sores form, these gradually increase in size and have a profuse, foul-smelling discharge. Sometimes these heal, but as a general thing, mortification sets in and spreads rapidly. If on the foreskin this is soon destroyed, when on the head of the male organ this is quickly eaten away, and the destruction going on part or all of the penis may disappear, even as far as the bony arch (pubis). Strange to say, all this does not set up much disturbance except for the extreme tenderness, there is little or no fever, etc.

The principal danger is the condition may be mistaken for the "soft sore," an entirely different affair. Luckily the germs can be found in the discharge when treatment must be promptly started to stop the spread. This consists, among other things, of allowing free access of air by slitting up the foreskin, for the germs belong to a large class which grow best when they are protected from the air.

#### INFECTING THE INNOCENT ONES

The following human tragedies illustrate the most frequent disasters resulting from the contamination of the family through venereal disease, namely:

1. The loss of motherhood, even of life itself.
2. The mutilation of the wife by surgery to preserve her life.

3. The loss of eyesight in the new-born infant.
4. The loss of pecuniary support through the disability of the husband.

1. A girl 22 years old married a man of 26. About a month after the wedding the bride was confined to her bed for several days with severe pains in the pelvic region, accompanied with fever (peritonitis); and she remained a semi-invalid from that time. On her return from their European trip five months later she was examined by a competent physician. The cause of her illness was found in a gonorrheal abscess of each Fallopian tube, which rendered her an invalid as well as sterile. Careful treatment produced but slight improvement. Finally a surgical operation was performed and the tubes removed. This greatly improved her health though she is, of course, permanently barren. The husband admitted that he had twice contracted a mild gonorrhea while at college years before, but considered himself cured. Examination revealed the germs of this disease in him.

2. A bride 18 years old came with her mother two weeks after her wedding. She was suffering from newly acquired gonorrhea. After eight weeks of constant treatment she was apparently well. *Her husband had lived "like other men."*

3. The patient was a bride 22 years old, a beautiful woman of excellent family. She was suffering from gonorrhea contracted from her husband, who had supposed himself cured before the wedding. An operation, which offered the only chance of saving her life, was performed. All went well for a few days. Her husband, who had been constantly with her, was called away on urgent business. The patient suddenly became worse and died before his return.

4. A man with gonorrhea of fifteen months duration, applied for treatment with the request to cure him in six weeks, as he was bound to get married at the end of that time. After examination the patient was warned that he could hardly expect to be cured by that time. At the end of six weeks permission to marry was refused. The patient disobeyed and married the heiress to a considerable estate. She became contaminated with his disease. Five months after the wedding she was taken to a hospital, operated upon for gonorrheal abscess, and died two days after the operation.

5. A family consists of a father, mother and three children; the father is a mechanic, works at night and sleeps during the day. At night the mother and children occupy his bed without changing the bedding. The father contracts gonorrhea, a druggist prescribes for him on his way home from work. In a few days the baby develops gonorrheal inflammation in both eyes, and a girl of 6 shows the disease in the sexual organs. Both children became infected from the bed polluted by the father.

6. A married man while intoxicated contracted gonorrhea. His little daughter 7 years old, who slept in the same bed with him, developed the disease in both eyes. Careful treatment fortunately saved her eyesight.

7. A young bride was infected with gonorrhea by her husband, who supposed himself cured before marriage. When her baby came its eyes were infected; and it was saved from total blindness only by most painstaking care, covering a period of three or four anxious weeks. During the treatment of the little one's eyes, in spite of care and warning, the mother's breasts became infected, causing a painful and tedious abscess.



In another case, also of gonorrheal inflammation of the young mother, the babe's eyes were infected; within two weeks both were lost, and the child is totally blind. *The majority of these cases are due to lack of knowledge on the part of the husband, who is not told that the disease may lurk in his deeper parts long after it is outwardly cured.*

8. We have in the children's department of the County Hospital numerous cases of gonorrhea among the children, especially the little girls. The increase of this disease in our children's department has been alarming during the last two years, and we are sometimes unable to trace the source of infection.

9. "E" had been most carefully reared, coming of ministerial stock for generations past; a young man to whom she had been engaged for three years betrayed her. She came to us two months before her child was born and had never showed any signs of syphilis. The little one, however, was diseased when born, suffered greatly during the four short months of its life and then died, its little body gradually becoming decayed from the time of its birth.

10. The most pitiful case of inherited syphilis I have known is a girl of 18 who is just learning to spell "cat" and "dog." Her growth has been stunted and her vision practically destroyed by this inherited disease; and though she has been helped by proper treatment she will always be a loser in the fight of life.

11. A young wife gave birth to her first child, a credit to the parents. During her invalidism the husband met a former sweetheart, contracted syphilis from her and before he became aware of his own infection, contaminated his wife. She developed syphilitic sores in the mouth, and through her kisses infected the child with the disease contracted from her husband.

12. A young man married two years after he had contracted syphilis. Within a year his wife had a spontaneous miscarriage, her child having been destroyed by the taint inherited from the father. A year later she gave birth to a puny child which bore the marks of the same disease.

Soon after the birth of this child the father, who had apparently enjoyed good health, awoke one morning to find his right arm and leg completely paralyzed and his ability to utter words abolished, his paralysis resulting from syphilitic disease of the blood vessels in the brain. He gradually regained his power of speech and the use of his paralyzed limbs, though unable to earn a living for over a year. During this time the family was dependent for subsistence upon the charity of relatives. He will probably have more trouble from the same cause.

13. A young man who was on kissing terms with several girls, acquired syphilis. Though warned that he could communicate the disease by a kiss, he failed to resist temptation, and implanted the disease on the lip of each of two girls of good family.

14. Six years after acquiring syphilis, during which time he had married and begotten a child, a young man developed locomotor ataxia. The physical and mental disability thereby entailed caused the loss of a good position and bright business prospects; and the present financial outlook for his family is discouraging.

## CHAPTER XXI

### PROSTITUTION AND SEGREGATION .

PROSTITUTION is a legacy from antiquity. It has apparently existed since the childhood of the world, and so far as can be seen will continue to its end.

In olden days prostitution was at times a sort of religious observance. Thus in Babylon every woman was obliged once in her life to repair to the temple of the goddess Mylitta, corresponding to the Roman Venus, and offer herself to the first comer, her earnings going to the upkeep of the temple. An ancient writer tells us some of the fair devotees did not remain a day, while the homely ones had been waiting for a year or even several.

Later on licensed prostitutes were installed in the city-states of Greece. Thus Plato (in the 5th century before Christ), to protect the maids and matrons of Athens, purchased slave-girls from various countries of the ancient world and had them fed and housed at the public expense, their earnings belonging to the state.

As the centuries rolled on the calling flourished, until in the 5th century of our era (or about 1000 years after Plato), attempts at suppression began. The original one was by the empress of the Greek ruler, Justinian, and herself a former inmate of a house of prostitution. She founded a retreat for them, but as no applicants appeared, several hundred were seized and imprisoned; however, in a few months all the inmates had either died or committed suicide.

Another attempt was made by Louis IX of France, who (in 1254 A. D.) issued an edict against the *filles de joie* ("daughters of joy") as they are called in France to this day. And such attempts have continued from time to time up to this year of grace—1922. It has been recognized for many years that the illegal (?) or clandestine prostitute is as dangerous as the professional one, if not more so, in the manner of spreading disease.

In this connection, the English traveler Sir Richard F. Burton, about the middle of last century told a comical story:



He was in the Indian army at the time, and stationed in the province of Scinde. The prostitutes in the town where the English garrison was located, sent in a complaint to the military officials respectfully pointing out that the married women of the town were rapidly taking their means of livelihood away from them!

Michels quotes Meiner to the effect that more especially in the Middle Ages, physical love was regarded as an absolute necessity. In the case of imprisoned debtors, their creditors were compelled twice a week to send them sufficient money to enable them to pay for the services of prostitutes.

For many years the causes underlying prostitution have been the subject of investigation in Europe, and then in this country. An early effort (1855) was made by Dr. William W. Sanger, who was one of the physicians to the Penitentiary Hospital on Blackwell's Island, New York harbor.

He questioned some 2,000, and in his book tabulated the answers and comments on them at great length. We have room only for a few figures: Some 750 women were under 20 years of age. About one-quarter (521) were illiterate, unable to read or write. The social status was—single, 1,216; married, 490; widowed, 294. Nearly one-half had been leading such life for less than two years—less than one year, 634; one to two years, 325. As regards the alleged motive for resorting to prostitution, 513 said it was inclination, 525 were destitute, 258 had been seduced, 181 attributed their downfall to drink; various reasons were given by the rest. A good proportion (359) asserted they did not drink at all, 647 did so moderately; so this leaves practically one-half who were decidedly intemperate. Finally, of the entire 2,000 only 91 professed no religion.

Sanger's findings as to "inclination" were corroborated years afterward by the chaplain of Millbank Prison (England). He found most of the female prisoners who were prostitutes had taken up the calling out of pure "cussedness," as the expression is. They were not poverty-stricken, nor had they been seduced.

Lately it has become fashionable to account for prostitution by the assertion the women are of low mental development. Few men about town would be inclined to agree with this, at least the money-getting proclivity is not underdeveloped!

It has been well said that all prostitutes have venereal diseases *some* of the time, and some have such diseases *all* the time. In 1917, of the denizens of the notorious Barbary Coast (San Francisco), 97 out of every 100 were found diseased. Two years previous, practically the same number (96 per cent.) in Baltimore had a venereal disease. Even in such a small town as Pottsville, Pa. (20,000 inhabitants), of the 20 inmates in the three houses, 18 had syphilis or gonorrhea or both. This last instance shows how such diseases must be spread, one house had three inhabitants, and the cards of the latter by which their share of the day's receipts were to be determined, were punched 49, 37 and 28 times respectively.

Attempts have long been made, especially in Europe with its many garrison towns, to grapple with the prevalence of venereal diseases. A favorite plan, especially in France and Germany was licensed prostitution, though it has been known for many, many years over there, that the so-called "clandestine" prostitutes (shop girls, waitresses, barmaids, etc.) are fully as dangerous as the licensed class. In England, the Venereal Diseases Acts were repealed by the goody-goodies in 1886, since which time it is said the diseases have continued almost without check.

In the Russo-Japanese war, according to Thibierge, the Japanese installed free licensed houses, subjected to regular medical visits, and attributed to this the very small prevalence of venereal diseases in their army. In the Russian forces, with no such regulations, the number of venereal patients was very high.

Medical inspection is not thought of very highly in this country. To declare a prostitute free from venereal disease is not to be lightly undertaken, hence reputable physicians decline to sign such statements, and the usual examiner is more intent on getting his fee than of making a thorough examination. To show what a farce the ordinary "examination" is, every one of the prostitutes in Pottsville had a certificate from a physician that she was free from disease, yet as just stated nearly every woman (18 out of 20) was infected. The principal weakness of medical inspection is that granted a patient is absolutely free at a given moment, in two or three hours, they may be excessively dangerous to everyone coming in contact with them.

Segregation has been widely heralded as a cure-all for prostitution. This is a little beyond the scope of this work, so we



shall merely quote the following contrast from Pamphlet No. 4 (Montana State Board of Health) :

#### THE TWO SIDES

It is claimed that

#### SEGREGATION:—

1. Concentrates prostitution, thus facilitating control and reduction.
2. Decreases prostitution by regulation.
3. Decreases venereal diseases through medical inspection.
4. Enables control of the liquor traffic in connection with prostitution.
5. Prevents crimes against women.
6. Protects the community from offensive and detrimental proximity of prostitution.
7. Decreases graft in connection with prostitution, and the exploitation of the prostitute.
8. Decreases crime by enabling police supervision of a recognized crime center.
9. Safeguards against sexual perversions by providing an outlet for the unrestrained sexual appetites of men.
10. Protects boys and young men from contact with the prostitute by removing temptation from the streets and residence districts.

The truth is that

#### SEGREGATION:—

1. Increases prostitution, continually advertising vice by making it familiar. Affords a place of commerce, otherwise uncertain and precarious, to the least competent of prostitutes, mentally and physically.
2. Increases prostitution by increasing the demand, which increases the supply.
3. Increases venereal diseases by deceiving the ignorant into a fancied reliance upon a frequently "faked" and inevitably futile medical inspection.
4. Stimulates an illegal liquor traffic, since commercialized vice fails without liquor.
5. Tends to increase crimes against women by fostering promiscuity and providing a source of sexual brutalization and degeneracy.
6. Exposes the community by advertising vice as a community necessity, making it easily accessible and tolerated, a condition conducive to the moral degradation of the community.
7. Increases graft, by illegal toleration of commercialized vice, tempting the police to exact illegal revenue and confer illegal privilege. Gives free rein to the exploitation of prostitutes.
8. Increases crime by fostering viciousness and disease, providing a meeting-place for the idle and vicious, with whom, rather than with the police, the prostitutes sympathize and usually coöperate.
9. Fosters sexual perversions and abnormalities by educating men in habits of promiscuous sex relations until they cannot be satisfied by the professional prostitute except by perversions which she is compelled to practice.
10. Exposes boys and young men to contact with the prostitute by presenting an ever-present opportunity to "go down the line and see the sights." Provides a show-place for special obscene and depraved exhibitions, to which the youth is lured by "runners" and the sale of lewd pictures.

With the entrance of the United States into the World War, the question assumed an acute phase, for during the mobilization it was found one-fifth of the men examined for army service had some form of venereal disease, acquired in civil life previously in the vast majority. The usual beating of tom-toms was begun by the government officials and a steady stream of pronunciamientos,

**Comparative prevalence of Venereal Diseases and other Important communicable diseases in the U. S. Army.**

**Venereal Diseases** .....102.3

**Other Communicable Diseases..** 29.4

Pneumonia, scarlet fever, typhoid and paratyphoid. (Measles not included.) The figures above represent the annual rates per 1,000 for all troops in the U. S., based on the reports from Sept. 21, 1917, to May 31, 1918. These are accurate for comparison only. Prepared from reports to the Surgeon General.

decrees and regulations followed, of course, with heart-to-heart talks, movies, and leaflets galore at the training camps. The results were not altogether what could be wished, judging by the keeper of a house in France who complained to the army authorities that her inmates were kept so busy by the "doughboys" that they could not obtain the needed sleep!

**Comparison of the number of cases of Venereal Disease contracted before and after enlistment.**

**Before enlistment.....**5

**After enlistment.....**1

The number of cases before enlistment includes all uncured cases, old and new, as compared with the new cases contracted after enlistment. The great contrast, however, is mainly due to the better protection given to soldiers than is given most men and boys in civil life. The above estimate is based on reports from Camps Sherman, Lee, Upton, Meade, Custer, Kearney, and the Western Department from Oct. 25, 1917, to May 10, 1918. *Journal Amer. Med. Assn.*, Aug. 10, 1918, p. 456.

When the railroads were taken over, the U. S. Public Health Service entered the field, and special efforts were made among railway employes. The latter objected to being singled out, claiming they were no more immoral than any other class of workers. In cities near the training-camps, Louisville, for instance, raids



were made on houses in the redlight districts, and those present carted off to jail, where they were kept until a test could be made as to whether venereal disease was present. The city jail was soon so full there was no room for ordinary prisoners, then a ward in the City Hospital was taken over, and before long over 200 women were quarantined there for treatment.

In Chicago, and other municipalities and states as well, reporting of venereal disease has been made compulsory, the same as for scarlet fever, smallpox, etc. This leaves a wide loophole for well-to-do patients to escape by bribing their medical attendant.

Handling of venereal diseases is a huge problem, and it may be doubted if any practical solution of the problem has been suggested thus far. When an individual who has suffered the pain and misery—to say nothing of the expense—attending a case of gonorrhea, promptly exposes himself in due time to the possibility of fresh infection, how can we expect to reach such individuals with moral sayings or educational measures. We have in mind two such persons: The first worked in a bookstore, and used in his leisure moments to look over the medical works with pictures of the ravages of syphilis and other venereal diseases. Horrified, he would make a lot of good resolutions, but forget them all on the night of the next pay day. The other a chauffeur, had a severe case of gonorrhea, but was scarcely well when he contracted soft sores (chancroids), and before this is in type may have a fresh case of gonorrhea or mayhap syphilis.

As far back as 1873, the government authorities in Finland reported that after a crusade against venereal diseases in that country for the previous quarter-century, including free treatment for all those applying for it, both gonorrhea and syphilis were on the increase.

It is an old saying that "You cannot make people good by law." Despite this a series of rules have been promulgated. For example in the Suggestions for State Board of Health Regulations for the Prevention of Venereal Diseases, of March 29, 1918, Rule 8 runs as follows:

Prostitution to be repressed.—Prostitution is hereby declared to be a prolific source of syphilis, gonorrhea and chancroid, and the repression of prostitution is declared to be a public health measure. All local and state health officers should, therefore,

co-operate with the proper officials whose duty it is to enforce laws directed against prostitution, and otherwise to use every proper means for the repression of prostitution.

This is a good sample of the childish faith of government officials in rules and regulations. Having declared prostitution to be a public health measure, and declared a ruling, the naughty practice, will, of course, stop, instantler.

The Secretary of the Treasury, in Amendment 7 to Interstate Quarantine Regulations, decreed that persons infected with venereal disease must not travel except under certain restrictions. Some 47 state boards of health have agreed that "the travel of venereally infected persons within the state is to be controlled by state boards of health by definite regulations that will conform in general to the interstate regulations." It is claimed that lessening the travel of infected persons, will also lessen the dangers of the spread of venereal diseases. Let us hope so, but as the old English recipe for haresoup reads: "First catch your hare."

When the late Prof. Ehrlich announced the perfecting of "606" several years ago, he was in hopes that *one dose* of it would cure syphilis. This statement aroused a storm of protests from moralists—clerical and otherwise—who argued that if a patient could be cured so quickly, it would merely allow him to resume his evil practices. Ehrlich's hopes are not realized, it was very soon discovered that a somewhat lengthy course of treatment was necessary; on the other hand, it proved to be of enormous benefit in some forms of syphilis, especially that affecting the brain, which were either not benefited at all by the old methods of mercury and potash, or only very slowly.

The same arguments have been urged against the use of measures to prevent infection after extramarital intercourse. These strike one as somewhat narrow-minded, and far from the broad point of view we are endeavoring to adhere to in these pages.



## CHAPTER XXII

### QUACKS AND THEIR METHODS

THE work "quack" comes from an old Hollandish term, which like the one for the sounds uttered by ducks, means "to gabble or chatter." Several centuries ago these medical charlatans were in the habit of frequenting public gatherings like market-places and fairs, where they talked long and loud about their remedies, and from their incessant noise the word came to be applied to them.

In the '80s, many of the Chicago papers had glaring advertisements of several of these gentry, containing among other things: "The Doctor is 60 Years Old," "You See no One but the Doctor," "The Doctor Has 24 Parlors and Offices." Many of them died off, but others took their places, changing the wording of their traps for the unwary by making it appear they were using all recent discoveries, such as the X-ray, "606," etc.

At length (October-November, 1913) the *Chicago Tribune* started a crusade to put the Chicago concerns out of business. It is scarcely necessary to state that high-class paper never contained any of these swindler's advertisements, but other sheets—especially the ones in foreign languages—were less scrupulous.

One of the *Tribune* staff was first of all thoroughly examined by a number of well-known physicians connected with medical colleges, and unanimously pronounced a perfectly healthy man. (He was 25 years old, 6 feet tall, weighing 185 pounds, and had played football for 6 years.) Providing himself with a bottle of colored water containing a little ammonia, which masqueraded as a "sample of urine," he called on eight of the charlatans, and among other ailments was told by two he had "pustoris" and "specificus gravitus." (No! don't look these up in the glossary at the end of this book, for there are no such words in medicine.)

When his tour as a "patient" was finished, the accounts were duly printed in successive issues of the *Tribune* for the above months, and created such a sensation that most of the gentry promptly absconded. This enterprising and courageous paper has kindly given us permission to make extracts from the articles, and we gladly avail ourselves of the privilege:

## QUACK'S AIDS TELL OF HORROR CHAMBERS

The *Tribune* presents to its readers today the "confessions" of two men who know a certain phase of medical quackery from the inside. They are former employees of that eminent specialist in "getting the money," Dr. Edward N. Flint, who practices medical skullduggery at 322 South State Street.

The individuals who made the "confessions" were "floor men" in "institutes" which Flint conducts in a string of middle western cities as a side line to his regular "offices" in Chicago. The business of the "floor man" or capper is to mingle with the crowds that visit the "institutes," gain their visitors' confidence and lure them to the "case taker" and the doctor who fleeces them. It must be said in behalf of the two men who talked to the *Tribune* that when they entered Flint's employ they did not know he was a swindler and that they got out of the business as soon after they had learned the truth as they could.

Their names are suppressed because the *Tribune* believes them to be potentially honest and does not wish to destroy the reputation of men who, in different surroundings, would turn out to be useful citizens. "Institutes" of the kind Flint runs are well known to the average Chicagoan. They are the wax-work shows which recently have been ordered suppressed in Chicago by Health Commissioner Young. Some still are running surreptitiously. The visitor is attracted to the "institute" by a wax-work display occupying one of the windows. He enters and finds himself in a long room containing 100 or more wax effigies representing human beings in various stages of disease. The figures in the front of the room are exceedingly frank in their display of the human form. That is to give the show drawing power among the prurient.

As the visitor passes down the line, however, the statues undergo a subtle change. He finds chills of horror beginning to chase each other up and down his spine. He stops in front of a cabinet with a glass front. As he peers through the pane the interior of the cabinet suddenly is illuminated by electric light and the face of an idiot boy leers out hideously at him. Over the boy's head, sharply set off by a shaded light, are the words:

## LOST MANHOOD

The visitor starts away in horror and is immediately ap-



proached by a man in uniform, who suggests that he go up and see the doctor. A little farther on a tableau displays the ravages of venereal diseases. By this time, quite naturally, the visitor is beginning to feel ill. This is the time for the "floor man" to get in his fine work. The "floor man" has been watching the crowds carefully. He has picked this particular visitor as a "live one." He arrives at the man's side and offers his sympathy. He desires to know the visitor's symptoms. The visitor, glad to confide in anyone, tells what he thinks is the matter with him. The "floor man" gets him a drink of water and then adroitly ascertains how much money he has with him.

When this information is given the visitor is ready for the doctor. In the slang of the "institutes," the operation which follows is "feeing the patient." A patient is "feed" in the slang of the institute when he has been fleeced. If he comes back for a second fleecing he is "refeed."

#### MAKES A "DOCTOR" IN FOUR SECONDS

Fred Glover lives at 2618 Emmett Street. When Burgess assumed charge of the Atomo-Radio Company he was an obscure but ambitious elevator operator at 36 South Franklin Street. About a month ago, George Franks, who formerly worked for Dr. "Specificus Gravitus" Zins, walked into Glover's elevator.

"Hello, Franks," said Glover. "What are you doing?"

"Why," replied Franks, "I'm practicing medicine."

"Where do you get that 'practicing medicine' stuff?" inquired Glover. "You never studied to be a doctor."

Franks laughed. "Fred," he said, "you always were a boob. Wise up. You don't have to study to be a doctor. You don't even have to grow a set of whiskers. All you have to do is—but say, I'll show you how. I'll make a Doc out of you. I'm going on a vacation. Come on with me. You can have my place."

Glover says Franks took him to the Atomo-Radio offices and presented him to Burgess. He explained that Glover was a potential "wise guy" and wanted to substitute for Franks while the latter was away. Glover says Burgess looked him over, accepted him, fixed him up with a white jacket, and then gave him the following instructions:

Scare your patient into believing he has some disease.

Then find out how much money he has.

Get the money.

Then get rid of the patient as quickly as possible.

Don't waste time with a patient after he's broke.

Don't tolerate a moneyless patient around the office.

Glover started to work, but did not carry out the instructions to the letter. He had some home-grown medical ideas of his own and he supplemented this by reading medical books. He gave his patients good advice. He told them to eat and sleep regularly. His methods were so different from the other "specialists" in the place that he became popular with many of the patients. They would ask for him. After Glover had been there three weeks he was called before Dr. Burgess. The doctor had discovered that the former elevator man was treating the patients almost as if he wanted to do them good, instead of merely "do" them.

"What is the meaning of this?" Glover says Dr. Burgess asked him. "What do you think this place is? Do you think we want all of these patients to think they can get well without coming to us with their money?"

A few days later Glover was told his services were needed no longer. He protested that he had been induced to leave his elevator job with the understanding that his position was to be permanent if his services were satisfactory. He told Dr. Burgess that he had given up his former job and that he could not get it back.

"I realized then why they did not want me," Glover told the Tribune. "They want a man who will bunko the ignorant patients and get the money. The only man licensed to practice medicine at the Atomo-Radio Company is Dr. Burgess. The rest are taken from some other job. They know nothing of the legitimate practice of medicine. They make doctors out of them as they did me. They take them from the street, give them a white jacket, and they are 'specialists.' I could continue in the business if I wanted to be dishonest. They are merciless. They want the money. I think too much of my future to jeopardize my chances by robbing the patients the way you must do in those places. Now I am out of a job. I will have to sell my library to pay my rent unless I get a job this week. I have worked hard to buy these books and sometimes I study all night."



## QUACK'S MANAGER TELLS HOW SICK DUPES ARE RUINED

"I mixed the prescriptions. We had several shelves of medicine, that looked rather imposing. Most of it was colored water. The doctor would write on the prescription 'Aqua Missourianus,' which called for plain Missouri River water, colored green, red or blue, with fruit coloring. In Chicago and in Gary, Ind., the prescriptions called for 'Aqua Michiganus.' Hinkle's pills were a great favorite. You can get a dozen for a nickel in any drug store. We sold them seven for \$2. We had them in three colors, so that a patient could be kept using them three weeks, thinking they were different pills. Hinkle's pills are mild cathartics.

"Our popular 'come-back' prescription was elixir simplex. It is almost whisky and any man who uses it regularly can get a jag on it. They always came back to have the prescription re-filled. I used to make the stuff by the barrel. First, if we were out of alcohol I would send a boy with a two-gallon jar for one gallon of alcohol. When he returned I would fill the jar up with a gallon of water. Then I would be ready to mix. The prescription calls for four pounds of sugar, two and two-fifths pints of alcohol, and 'Aqua Missourianus quantitat sufficiat ad cong. II,' which means a sufficient quantity of water to bring the whole up to two gallons. Then I would add one and a half ounces of fluid extract of orange peel and color the whole with burnt sugar. It was a sure jag. We would get anywhere from \$2 to \$5 for a four-ounce bottle of the stuff.

"My reports were all made in cipher. I used to send them out every night. The cipher initials and the key to them are as follows:

" 'M. C.—Museum calls.'

" 'N. C.—New calls to doctor.'

" 'N. C. P.—New calls put—"put" means money collected.'

" 'C. B.—Comebacks—men who called at museum and after reading literature came back for examination.'

" 'C. B. P.—Comebacks put.'

" 'O. C.—Old calls.'

" 'N. F.—New fees—amounts contracted for.'

" 'O. F.—Office fees.'

" 'P. R. T. H. O.—Previous remittance to home office.'"

FORMER INTERPRETER FOR QUACKS MAKES CONFESSION OF THE  
SYSTEM USED

"I was interpreter and office man. I speak Polish, Slavic, Bohemian, Russian and English. The office was on the second floor. There was a reception room, a consultation room, the doctor's private office, the electrical room, and the pharmacy where we kept the dope.

"When a new patient would come in I would tell him that the doctor was performing a serious operation at the time and would let him sit there for about an hour, so as to let him think we were an important firm. First I would get his name and age and address and the place he worked and how much he got in salary and what day he received his pay. Then I would find out about his symptoms and whether he ever had been treated before. All of this information would go in to the doctor so he would be prepared. One of my duties was to keep new patients from talking with any old patients who might happen to be in the waiting room. If they insisted on talking it was my place to get into the conversation and switch it to some other subject. If it got too strong to swing I would isolate the new patient in one of the consultation rooms. For instance, here was a case of one fellow, I remember. When he came in I found out he was a second boss in the stockyards and how much he got, and that he was paid on Fridays. I took him into the doctor and explained in English he wanted attention.

"The doctor looked at the patient and shook his head and spoke to me. I translated and told the man he was in a very bad condition. Then we put him on the operating table. The doctor shook his head again. I explained the doctor was afraid to take care of the case because it was a serious one. Then the doctor asked me, 'Does this man value his money more than his life?' and I translated it to the fellow on the table, who would gladly assent to pay anything he had to be saved. The doctor then decided to take the case. After being examined this man asked what the charge was and the doctor told him \$25. The man pulled out a roll of bills with a \$50 bill on the outside.

" 'Wait a minute,' said the doctor, as he carefully began looking at the patient again. The patient weakened and lay back on the table. After more of the fake examination he was



separated from \$50, instead of the original \$25 which we had asked. He was given a prescription which was filled at our drug counter, and cost him \$5. There was just enough of the medicine to last him until his next pay day. I know that they never cured any diseases, because they had no real drugs to do it with. We used to get pills by the barrel."

#### ANOTHER FORMER "FLOOR MAN'S" STORY

"I am a salesman by profession. About four months ago I found myself out of work and looking around for something to do. I read an advertisement for a first-class salesman who could speak several languages. I answered the ad. and soon after received a letter from a Dr. Reinhardt. Reinhardt asked me to call. I visited the office and saw Reinhardt. He introduced me to Flint. Flint told me, 'You are just the man I want. I like your appearance.' I remained in Chicago during the next week, calling daily on Flint and Reinhardt and receiving from them instructions as to my future course of action while in their employ. They taught me a line of medical talk and prepared me for receiving patients.

"At the end of the week Flint and his wife and myself took a train for Indianapolis. Their plant there is at 28 S. Illinois St. On the ground floor is a window in which is exhibited a group of wax figures operated by machinery, which shows how to resuscitate a drowning man. That draws the crowd. I went to work on a Saturday. It was the last day of the automobile races and there was a big crowd. That day we had 800 visitors. I know that, because one of my duties was to keep track of the number of pamphlets printed in different languages that I gave away. I gave away 800. I was to be floor man. Before I went to work I had a talk with our casetaker, a man named Woods. His instruction in effect was that I was to 'con' the suckers and get them upstairs to him so he could get the money. This was a surprise to me, because I had come down to Indianapolis convinced the business was honest. I told Woods what Flint and Reinhardt had told me about misrepresentation.

"'It doesn't make any difference what Flint and Reinhardt told you,' replied Woods. 'You are working for me and you take your orders from me. Remember one thing: *We's here to get the money.*' I didn't like that very well, but I was broke and I

was there in Indianapolis with my wife without friends and it was up to me to make good. I thought, too, that I would be able to come to a better understanding with Woods through Flint. As a matter of fact, I know now that Flint wouldn't have helped me. All that talk he had given me about being honest with the visitors was just plain bunk. They wanted me to be enthusiastic. They knew that if I believed in them I would do better work.

"After my talk with Woods I was turned loose on the main floor. This was a big room full of wax figures. Flint had brought his wife down to see the plant. She never had been in it before. Honestly, I was ashamed when that woman came in there and looked over that stuff. It sure was a show for men only. The real chamber of horrors, though, was on the next floor. That was where they took the suckers to throw the final scare into them. Before I went to work I had a last talk with Woods. He gave me one caution. 'Don't tell 'em you are a doctor,' he said. 'If they call you "doctor" that's all right. You don't have to deny the title, you know.'

"With that he left me and I found myself alone with the negro porter among those wax statues. Pretty soon the 'hicks' began to come in. I walked around among them and engaged myself in friendly and seductive conversation among the ones that looked like they had money. My instructions gave me two things to get out of them. One was their 'weak point'—what they thought was the matter with them. The other was how much money they had with them.

"The work was pretty easy. Most of the visitors were *young fellows from the country*. A large percentage of them were not sick at all—only thought they were sick, the result, usually, of a guilty conscience. I'd talk to them a while then stick some disease on them—I had a list of diseases from Woods. The virulence of the disease depended on how much money the sucker had. If he had lots of it I'd tell him he had syphilis and show him by means of the wax figures that he was developing the symptoms. One fellow had a wart on the side of his hand. I convinced that chap that he was in an advanced stage of syphilis simply by comparing his wart to a wart on one of our wax dummies. After I had convinced him he had the disease, I took him upstairs to the chamber of horrors and showed him what he would be like in a week or two if he didn't take our treatment.



"This work, as I said, was pretty easy. I didn't have any pangs of conscience about skinning these 'boobs.' Most of them had a skinning coming to them for the way they had been acting, and I figured that anyway it would be worth money to them if we did throw a scare into them that would keep them out of trouble in the future. But a little later in the day I ran across several patients that worried me. One of these was a poor devil with a cancer. I knew by looking at him that the best doctor on earth couldn't cure him. Another was a fellow so weak with tuberculosis he could scarcely walk. I went through the motions and got them up to the doctor. Without batting an eye our quack told them he could cure them in a month. This went on for two days and all the time I was getting sorer and sorer on my job. The blow-off came on the afternoon of the second day when a nice young chap came in and said that he had hernia.

"He had been to another quack, and *the quack had injected paraffin* into him. The paraffin had formed a lump. He was going to get married and he wanted himself fixed up. I knew by this time what our doctor would do with that case. He would take out the first lump of paraffin and then inject some more in another place. I felt sorry for the fellow, but I took him upstairs to the doctor just the same. Our system of introducing patients to the doctor was this: We walked upstairs and I pushed a button for the doctor. He came out, and I introduced him to the patient. Then we left the patient alone in the doctor's reception room.

"The doctor went back to his office, and I walked out into the hall and over to the case-taker's office. I'd tell the case-taker what our patient thought he had and how much money he had with him. Then the case-taker would pick up a phone on his desk and tell the facts I'd given him to the doctor. After that the doctor would send for the patient. He'd diagnose his case right away as syphilis or whatever I had told the case-taker. The consultation would follow. The doctor never said a word about money. At the end of the interview the patient would want to know how much the treatments were going to cost him. The doctor would put on a look of hurt dignity and reply:

" 'I never discuss money matters. I am a physician. You'll have to talk to Mr. Woods.'

"Then he would give the patient a slip of paper and get him

out of the office. The patient would walk over to Woods' office present his slip of paper and ask the price. Woods would tell him the treatment would cost him so much down—the amount he had in his pocket—and so much later. The patient invariably was so badly scared by this time that he would give up quick. You see, it was all cash business. After we'd hooked them once we didn't care if they never came back.

“Well, when this man got into Woods' office Woods told him that the treatment would cost him \$25. I'd told Woods that because the chap had told me he was hard up and I wanted to make the case a flivver. The fellow with the hernia hummed and hawed and then said he would go and get the money. He came downstairs and asked the porter for me. Then he started in to tell me his troubles. He said that if he had to give up \$25 he would have to put off his marriage. That made me feel ashamed of myself.

“‘What shall I do?’ he asked.

“‘Do,’ said I, ‘why, you clear out of this place and don't come back again. Those fellows are a bunch of robbers.’

“Well, right there is where *I lost my job.*”

DR. ISAAC WALTER HODGENS. HE TELLS HIS PERFECTLY HEALTHY CALLER HE HAS PROSTATITIS AND WANTS \$35 FOR TREATMENT

Hodgens' place is at 35 S. Dearborn St. He advertises “scientific direct methods” for curing “specific blood poison, acute and chronic infectious diseases, weakness and nervousness” in the shortest possible time, and lays emphasis on the fact that he is a graduate of Jefferson Medical College. He informed a perfectly healthy investigator who called on him that he was suffering from prostatitis and offered to cure him for \$35. This diagnosis was based on an examination of a mixture of water, ammonia and anilin which had been submitted to him by his “patient.” It is true that he is a graduate of Jefferson Medical College. He was licensed to practice medicine in this state in 1902. He lives in Wilmette.

Oct. 10.—I visited Dr. I. W. Hodgins, second floor of the Crilly building, today. I gave the name of H. Vanderveen.

“What is the matter?” asked the doctor when I entered.

“Nervous,” I said. “Wanted to have you look me over. I haven't been feeling well.”



He looked at my tongue and said it was badly coated. Then he examined my eyes with a magnifying glass.

"Appetite?" he asked.

"Sometimes good. Sometimes bad."

I told him I was worried over my health because I couldn't enjoy the work I was doing—inside work over a desk.

"I think that something is wrong with your urinary tract," he said.

He asked me to bring him a specimen to-morrow. He said his bill would be reasonable and to feel perfectly safe. He did not require any sort of a deposit. On the walls of his office are pictures of persons in various degrees of syphilis. He ushers patients out of the office by a rear passage.

Oct. 11.—I called on Dr. Hodgens again to-day. I delivered to him a bottle, which he had provided yesterday, filled with a mixture of water, ammonia and anilin, obtained from the American Medical Association.

"I will have to examine this, Mr. Vanderveen," he said. "It will take me ten or fifteen minutes. Wait here."

He returned in about ten minutes. "Be patient, Mr. Vanderveen, I don't want to say I know what's wrong until I have thoroughly examined the contents of the bottle. I think there is uric acid in it."

In ten minutes he returned again and examined the prostate gland.

"Very sensitive, very sensitive, young man. I will have to make a further examination."

"What is the prostate gland?" I asked him, "and how serious is the trouble?"

"It is a gland just at the neck of the bladder. It might be said that it controls the nervous system. When that is deteriorated *you are nervous*. You are run down and have no desire for work."

He went out and returned in a moment; then asked me to step into his assistant's office. The assistant, named "Smith" (he said), examined me further.

"Very much enlarged," he said with a long face, "very much more than I expected. I want to give you treatment."

"How much will it cost?" I asked.

"Well, the regular price for this treatment is \$50. You had better take it. You are facing a dangerous thing.

"Considering your condition financially, I think we can give you the treatment for \$35. How much can you pay now?"

"Three dollars is as much as I can give," I replied.

"We don't like to take less than five. How often can you make payments?"

I told him once a week and he seemed satisfied.

"I guess that is enough for this afternoon," he said. "I will want to give you another kind of treatment soon, but you are in too delicate a condition now for it. Come on Monday night."

He escorted me to his drug dispensary and provided me with a bottle containing a red fluid. It was marked "Private Formula." He seemed worried about my condition.

"Now, Harry," he said when I left, "I am glad you came to us. You are in a serious condition."

Then he handed me a small packet of pills.

OLD DOCTOR SWEANY CO. DR. MCCANDLESS DISCOVERS VARICOCELE  
AND WANTS \$50 FOR AN OPERATION

The establishment of Old Doctor (Francis Leaverett) Sweany is at 63 W. Randolph St. The reporter who visited the place was received by a Dr. McCandless. He was told he had varicocele. The "patient" had been previously diagnosed by another quack as a syphilitic. Dr. McCandless, however, found no trace of this disease. He wanted \$50 for a minor operation. Dr. Sweany, who established this concern, was a graduate of the Medical College of Indiana, Indianapolis. The school is now defunct. He practiced simultaneously in Chicago and Philadelphia from 1900 to 1908 and in St. Louis from 1900 to 1902.

Oct. 10.—I went to the office of Dr. Sweany & Co. today. A flamboyant sign stops you as you pass on Randolph at. Dr. Sweany's name is on the sign and on the door in big letters and it is on the steps in metal placards several times. A young man asked who I was, and, learning I was a new patient, went at once to the "doctor in charge." While he was gone a janitor stuck his head in the door and wanted to know my "number." I told him, I was a new patient, and he made tracks for the front office also. The doctor in charge—his name is McCandless—invited me in, smiled, stuck out his hand, and asked what he could do for me.



I told him I was to be married in a month and wanted to see if I was all right.

"I have been told I had syphilis," I said, thinking of an experience the day before with "Prof. Ehrlich," "and I want to be sure I haven't."

"What leads you to that belief?"

"Well, there's the hair falling out, doctor—and the tightness of the throat."

"I don't think you have syphilis; you don't look syphilitic. Let me examine your hair and your throat."

He strapped a magnifying glass to his forehead and trained it on my throat, pressing down my tongue with a nickel plated instrument. Then he felt my scalp.

"No, I don't believe you have syphilis," he said. "The falling hair may be due to some affected hair cells. I am of the opinion that a blood test would show negative."

After some more inquiry he said I had varicoccele.

"That case of varicoccele is not very bad now, but it's weakening. You are a young man now, vigorous and healthy, and you do not feel its influences as yet. But you would find it weakening. *I would advise you to have it fixed.*"

"How much would it cost?"

"Fifty dollars."

"That's an awful lot of money, doctor."

"Well, it seems a good sum now. But you can afford it better at this time than after a while. You owe it to yourself and to your future wife to be in perfect health."

"I think I can borrow it," I answered after studying the matter for some moments. "I am sure I can. Would you want it all at once?"

"Oh, no, not necessarily. You could pay \$25 now and \$25 later, or you can pay so much—say \$5 or \$10—a week. We can cure you easily in the month."

He then wrote my name [Everett Dimond today], age, occupation, grocery clerk in Wilmette, and the amount of the fee. Dr. McCandless is a rather tall, spare and solemn man, with a look of profound sincerity and trustworthiness.

\* \* \*

"I am so glad that your paper went after those quack doctors," writes a girl in South Chicago, "that I simply must tell you

of our sad experience with one of them. We gave that big Dr. Sweany Co. pretty near all my brother Alex made in wages one whole summer. Alex was a deckhand on a Graham & Morton boat and had to sleep in all kinds of places. One day he came home and told mamma he had broken out all over his body and could not sleep. I had been reading in the newspapers the advertisements of those doctors. I thought Alex had contracted some bad disease in his dirty job, and mamma and I thought it best he go to Dr. Sweany and be cured. Dr. Sweany took one look at him and says sure enough he has this bad disease and that if he didn't get busy at once he would die in a short time. He told Alex it might take a whole year to cure him, but he would take the case for \$60 and guarantee a cure.

"We all got together and secured the money, with the understanding that Alex was to pay us back as he got paid from the boat company. The doctor gave him only some yellow ointment to place on different parts of his body. Alex used this for two months, but instead of getting better grew worse. Mamma became alarmed, got Alex to take his shirt off, and found that the only thing the matter with my brother was that he was covered with vermin. We went to the drug store and asked the druggist what kind of ointment Sweany had prescribed. He said it was sulphur, and he would sell us enough to kill a dozen crops of vermin for 50 cents. It cured Alex when he rubbed it all over his body. Sweany knew what was wrong all the time, but he told Alex if he did not keep up the treatment he never could get married and in a year or so he would either be dead or in a sanatorium. Now, we will admit that we are ignorant and don't know much, but we surely thought no human being would ever treat us that way. It surely would do my heart good to see the whole Sweany Co. in jail for life—also the rest of his kind. And for what you have done so far I will promise you that I will read the *Tribune* every day of my life, and I hope you will continue to get after them still worse."

Here are other letters:

"Chicago, Oct. 27.—[Editor of the *Tribune*.]—Your exposé of quack doctors reminds me of how I was robbed of \$60 or \$70 by Dr. Sweany. I went to his office. After scaring me he said he would guarantee to cure me for \$45. As I thought I was all in and thought \$45 would cure me, I handed over \$45 cash. He



gave me a few electric treatments, and then he wrote out an apparent prescription inclosed in a sealed envelope and told me to take it to a certain drug store. As he had guaranteed to cure me for \$45, I thought that included the entire cost. To my surprise the druggist brought out four small bottles of medicine and after spending five minutes telling of the great importance of the medicine I was shocked when he said the cost was \$11. Here I had just paid \$45 and was now paying besides for medicine. I saw in an instant that I was jobbed. I finally beat him down to \$6 for the four bottles. I was ordered to take two teaspoonfuls before and after meals and at bedtime. In the meantime I called at the office every few days for a little electric shock. I figured I would not get any more medicine. In a few days the doctor, knowing the medicine was exhausted, handed me another envelope. However, I took it to a different druggist, and he said it was no prescription at all, simply a code between those two parties. I decided I would take no medicine at all, but continue to take the electric. I found, however, the doctor would give me no treatments unless I had medicine, so I quit. "WALTER."

"Chicago, Oct. 28.—[Editor of the *Tribune*.]—I had an attack of the grip. I went to see Dr. Sweany. I was just 21 years of age, and after he made a thorough examination, during which he frightened me almost to death, I was told I had varicose veins and that for \$35 he *would give me a written guarantee* to cure me as soon as possible. The guarantee I later discovered was nothing more than a contract to pay \$30 in thirty days. I made a deposit of \$5 at the time. After providing me with two bottles of dope, one for external and one for internal use, I was told to return in a week for further treatment. The medicine I took internally did not agree with me. Upon my return I was given another bottle of the same stuff, which upset my stomach still more, so that I gave it up, got disgusted with the treatment, and did not return the following week. I soon began to feel much better, but I received a letter from Sweany, chastising me for not coming back, threatening me with dire results regarding my future, and calling my attention to the fact that I still owed \$30, and that if I did not call within ten days they would put it in the hands of their legal department for collection. I saw I had no chance to fight and called and paid the \$30." "EVANSTON."

## PIMPLES

At the time when adolescence sets in in the male sex, as has already been stated, the beard commences to grow and hair comes out on other parts of the body in both sexes. This merely shows the skin is becoming more active, and one sign of this increased activity in many boys is the appearance of little pimples, on the face especially. Foolish individuals believing this is a symptom of "lost manhood," become frantic and consult—or worse, write to—quacks who frighten them into paying more money than most of them can well afford, and for what? An alleged "cure" of a condition which is as natural as the sprouting of the beard, not an indication of any venereal disease and no cause for worry.

We say writing is much worse than a personal interview, for the reason that the quacks exchange letters or lists of names with each other. On the other hand, such letters are regularly offered for sale by brokers in mail-order lists. Several years ago one of the New York brokers offered no less than three million for sale at a fixed price.

## LOST MANHOOD

Quacks are shrewd, they know nearly every boy has indulged in masturbation more or less, and has "wet dreams." With this knowledge they bait their traps with cunningly-worded advertisements. The result is crowds of adolescents call on them or write to find if they really have "lost manhood," and after calling or writing are generally convinced they have. The "doctor" shows them one testicle is lower than the other, a "sure sign" of varicocele, or else a sample of urine contains a cloudy deposit of mucus or a layer of red crystals at the bottom. We have already seen under Anatomy that in the great majority of males the left testicle is lower; as for the mucus, that is from the lining of the bladder, and the small red crystals are nothing but acid from the kidney which may be discovered in the urine of little babies.

The more one reads and sees of these fakers the more truth there appears to be in the old motto of P. T. Barnum: "The public loves to be humbugged." High-grade and reputable physicians never have to drum up business by advertising; neither



do lawyers. Furthermore, no doctor finds it necessary to "guarantee" a cure, as do all these alleged "specialists."

Sad to relate, some individuals become so despondent over the prospect that they put an end to themselves, and the leading medical publication of England, the *British Medical Journal*, commenting on a case of suicide, said editorially: "We receive despairing letters from those victims of foul birds of prey who have obtained their first hold on those they rob, torture and often ruin, by advertisements inserted by newspapers of a respectable, nay, even of a valuable and respected, character."

It is curious that in this country little or nothing was done by medical journals to put a stop to quackery. It remained for an influential paper like the *Chicago Tribune* to make the charlatans rapidly hunt a hiding place.

## CHAPTER XXIII

### MODESTY AND PRUDERY

#### MODESTY.

THESE is considerable uncertainty as to the exact origin of modesty. It certainly has nothing to do with clothing, for in some of the Pacific Islands, the men are naked and the women clothed; while in a group possibly not far away, the men are clothed—such as it is in those hot climates—and the women wholly nude. Now a German traveler tells us that the women and girls in New Britain, one of the island-groups, are extremely modest and respectable notwithstanding they have not a stitch of clothes on them. So too, Mrs. Isabella Bird Bishop, the famous lady-traveler, after living several years among the Japanese writes: “A woman may be naked and still behave like a lady.”

Westermarck, the celebrated Finnish historian of marriage, gives as his opinion that clothing was originally intended not to hide or protect the body—but to render it attractive from the standpoint of sexuality.

Nor is modesty confined to the female sex as a woman physician thought some time ago. She wrote to a medical journal stating how agreeably surprised she was while assistant in a dispensary, to find the male patients modest, even though from the working classes! The good lady evidently labored under the delusion that modesty is a strictly feminine attribute.

#### PRUDERY.

This false modesty which is diametrically opposed to the genuine article was much more common years ago. When Mariana of Austria, was on the way to become the bride of Philip IV, of Spain, long before the days of railroads, she perforce traveled by carriages. To relieve the tedium of the long trip, a visit was paid with her suite to a factory where stockings were made, and the future queen was much interested in the process. A pair which were nearly done at the time were hastily finished, and sent to the future queen before she left the town as a souv-



enir. An old lady-in-waiting to whom the messenger delivered the gift, drew herself up and thrusting the package back said: "Sir! the Queen of Spain has no legs."

Long after this humorous saying, we used to hear of the spinster ladies in Boston who hid the "legs" of their pianos in pantalets, and a near relative of them, she being left some money by an uncle always referred to it as a "*limbacy*", never as a *legacy*.

The growing sexual laxity and degeneration of the modern world has caused the educators of all lands to turn their eyes in the direction of sexual ethics and education. A considerable literature has resulted, based, for the most part upon the following ideas: That the Christian Church has from the beginning looked upon the sex instinct as something sinful and shameful, the claims and functions of which should be veiled in obscurity; as a result young people have been left to the dangers and responsibilities of life without any adequate knowledge and preparation; and that their situation becomes increasingly impossible the more modern economic life withdraws young people from parental control at an early age and exposes them to a thousand uncontrollable influences. It is further asserted in most of these publications that the best means of combating the danger is as early and complete as possible an *instruction* in the nature and dangers of sexual relationships. (Foerster).

Along the same line Mrs. Scharlieb bids us remember that all natural appetites are divinely implanted, and that there is no more sin and shame in the proper gratification of one than there is in the proper gratification of another. It is right to eat when we are hungry—provided that we can properly and honestly obtain food, it is right to abstain from food—even when we are hungry—if the means to satisfy our hunger can only be obtained by force or fraud. So, too, with regard to other appetites equally divinely implanted; their gratification must depend on the right and privilege that may be made for them.

Conventional hypocrisy, remarks Michels, is to a large extent unknown in Italy. To the stranger passing the night in a hospice, the nun will indicate the privy in the most simple way in the world, without a blush—and without thought of the need for one. "At a dinner party at which the author was one of the guests, the host before we sat down to table indicated to us all

the whereabouts of the water closet. Not one of the guests was in the least embarrassed. In speaking to a pregnant woman, to allude to her condition, even though she is a stranger is regarded by the Italians as in no way improper."

The safest foundation—he continues—for the treatment of sexual matters is to be found in a natural way of thinking and feeling. In a nation which regards the sexual impulse as natural and truly human there will be less tendency to the misuse of that impulse. For this reason, though in many respects more sensual than the northerners, the southerner is less inclined to obscenity and pornography. A glance at the sexual life of Italy, concludes Michels, will convince us of the truth of this view.

There is a growing conviction that innocence (or at least ignorant innocence) is no protection for virtue, but this aspect is taken up much more at length in the chapter on Sex Education.

Judge Ben Lindsey, as magistrate presiding over the Juvenile Court of Denver, Colo., is certainly in a position to see the distressing effects of the lack of this sex education. Several years ago in an article (in the *Ladies' Home Journal*), he wrote that after careful inquiry he found that only 5 per cent. of parents had ever said anything on sexual matters to their children. The large majority naturally supposed their own children were in complete ignorance of such matters, and were dumbfounded when they discovered their mistake. "Parents do not know their children," he continues, "nor have the least idea of what their children know, or talk about and do when away from home." As a result of his observations he is convinced 90 out of every 100 girls who "go wrong" do so from lack of supervision by the parents. Another of his findings—and a very sad one—is that in the majority of fallen women, the damage is really done before the age of 12 years. "Every wayward girl I have talked to has assured me of this truth."



## CHAPTER XXIV

### THE BURIED LIFE\*

CHILDREN, like birds and beasts and peasants, are crude in their desires, frank in their assertions anent their desires. When they are still too young to "know" better, we guardians of purity forgive them. We invent symbols, diminutives and fairy tales to accelerate the conversational flow between adults and children. Children are children, we say to ourselves, soothingly, and do not perceive the equivocal buried intention behind our petty romances.

"The Doctor buys the baby at a high-class department store" is an adequate account of procreation for the little imp, so we say to ourselves, soothingly. God has played a malicious trick with the life stuff; functions which evoke the contradictory emotions of love and disgust are discharged by the same organs. The love-life in childhood functioning is absent; in that same functioning the disgust-life has already begun its physiologic expression as a master of direct necessity. When the child speaks of its body and its needs it can speak only crudely, for its every remark symbolizes a function of its disgust-life (from the adult viewpoint!). The adult can't speak to it of the love-life because it has had no experimental background for the housing of naked truths. Consequently the painful dilemma arises: Shall we feed a child's curiosity on fairy tales or on truths which (in the very nature of its physiologic sex-phase), can arouse only dumb incredulity or disgust?

Educated mentors solve the dilemma by instilling fairy tales. Uneducated tormentors meet the situation by curbing, or utterly tabooing, curiosity. No one speaks naked truths. No one lacks the courage, the vocabulary, the technique, the conviction. The pathologic result is that children stop asking questions about their bodies. Or in adult phraseology, their curiosity has been "forbidden." It hasn't. It has only been diverted, repressed, side-tracked.

The evils of hushed secrecy are numerous and tragic. Children soon learn to distrust their parents on the most vital ques-

---

\*By Samuel Schmalhausen in *Birth Control Review*, June, 1919.

tions of living. Parents suspect their children of pruriencies. Neither trusts nor consults the other. Silence is not always golden; it is more often wooden. The silence of the sexes is a dead weight on childhood's conscience. Children commit their violations and shames in dark secrecy. Parents commit their violations in darker secrecy. Misery loves company, but misery is too self-conscious, too proud, to seek it. In the unsweet loneliness of their privacies, parents and children work out their heart breaking salvations. And life is too callous to weep.

The dirty and distorted notions about life and love which little children "pick-up" in gangs, on street corners, in bed, by hearsay, on the school premises, in adult society, in all the twilight alleys of gossip and scandal, are the chameleon, damaged goods later refurnished for show and barter at the Bargain Counters of Life: love and marriage.

Love and marriage can't possibly be clean when childhood is dirty. The adult conspiracy of silence supported by the juvenile conspiracy of dumbness is responsible for the sexual perversions of men and women. Conventionality exercises a double restraint on instinct; first, it taboos frank curiosity as indecent; second, it enforces celibacy beyond the power of normal endurance. The age of puberty tells the tale very graphically. Puberty is the sexual stir of self-consciousness. Puberty becomes shipwrecked in terrible straits. On the shoals of necessity it flounders fitfully. Hacked by the reefs of doubt and despair, it lunges forward and backward in moods of terror. What would it not give for peace, the peace that never arrives to steady it. Only more rolling and tossing and rocking and lunging in crazy spurts of emotion.

The pathos of puberty is its shameful ignorance. Conventionality and evil-doing restrain truth-telling. The inexperience of youth mistakes longing for life. Passion plus ignorance yields despair, reinforced by satiety or by revulsion. Nature has endowed children with the instincts of adults; it has not equipped them with the knowledge of adults. The disharmony between instinct and understanding is directly responsible for the moral chaos of youth and young love. For youth, love is blind. Have you ever talked with an adolescent who could stammer a sane word about his sex life or about his love affairs? I haven't.

Once upon a time there lived some noted scientists who rejoiced at the prolongation of infancy-in-mankind with its pos-



sibilities of increased education. Little did they, in their overwrought enthusiasms, divine the perplexities of prolonged "infancy." Did they ever dream of the huge costs in mental waste and moral confusion which the postponement of maturity involves? What of the intense suffering of the numerous civilized (saddled with conventional inhibitions), whose intellectual absorptions are dearly purchased at the expense of sexual normality? What of the costly sacrifice of marriage to ambition, of sex to art, of love to duty? Does any one know how dearly we pay for our "purities?" Has any one studied the relationship between deferred maturity and moral duplicity? Between moral chaos and the struggle for refinement? We all know that civilization refines our ideals of love-and-sex far beyond our instinctive capacities for the fulfillment or honorable realization of such ideals. We all know the more obvious results: Prostitution, doll's houses, abortions, miscarriages, polygamies, dualities, duplicities, illegitimacies, sterilities,—the marital disharmonies. Unspeakable! We call this mad concatenation of lunacies, conventional civilization! Men who evade these problems of disharmony are the happy ones; the realists are tortured by the facts.

Long continued repressions of sexually-minded instincts produce pathologies. Pathologies are morbidities thrown off by steaming hot impulses, restlessly agitating the depths of subconsciousness. The neurotics (no person is free from the taint of neuroticism) are the desolate examples of thwarted desire. Symptoms are merely the superficial signs; deep down in buried memories lie the rascally desires whose forced suppression has bruised the peace of the conscious mind and made "normality" impossible to the sufferer. Symptoms are so many entrances into the subterranean byways of the buried life, or (if you like) so many red lights exist for the outcast impulses of consciousness. Neurotic symptoms manifest themselves in diverse ways; in hysteria, in phobias, in bizarre dreams, in phantasies, in fanaticisms, in all manner of disturbing reveries. Psycho-analysis imparts a wonderful (and to me, most pathetic) significance to the proverb "We dream our lives away." Indeed we do; we desire so much; we achieve so little. Into the void, the spirit of dreams pours poetic phantasies and rich fulfillment. Our dreams compensate our aching hearts for our lacks. We do actually dream our lives away, for waking, we are mere slaves.

Everybody knows something of the tragedies of the buried life. How women, bullied by male aggressors, learn to give themselves unwillingly. How refined girls wake with a start to see themselves besmirched by sex. How philosophic young men labor with spiritual might to dyke effectively the rushing streams of sexual suggestions. How children's minds are polluted by scraps of perverted fact and fancy trickling down from the life sexual. How fecund mothers grow weary from an exhausting travail and a passion wounded by over-indulgence. How the "prima nox"\* is wrapped in real and fantastic terror (especially for the sex-shy young woman) too gruesome to narrate. How sexual congress, its regulation, effects, *raison d'être*, becomes to the betrothed a theme of morbid anxiety and significance. How love may be marred by whim and passion by mood. How a sudden breathless confrontation of the truth-about sex may bewilder and outrage the novices in mating. And a thousand slimy disturbances. Lovelessness after marriage. Celibacy by design. Moral fanaticism. Remorse, Moodiness and frequent separation. Divorce in fact though not in law. Estrangement without apparent cause. Perversity and duplicity. The waters of bitterness. Living death . . . "Marriage is divine in its inception, infernal in its conception, hellish in its deception."

The esthetic joy of living thrives on novelty and harmony. In the personal life moods are all important. When moods clash, harmony is broken, novelty forfeited. The marital intimacy is naturally a coalescence of joyous moods. Violate the harmonic bond and discord reaps its evil reward. The artistic value of wooing in this sweet enthrallment of moods; self-abandon with delight. That married couples so soon forget the diplomacies and enticements of the prenuptial days is a shattering indictment of their characterlessness. Wooing after marriage is infinitely more important and compensating than blasé mates are willing to avow.

The production of atmospheres and harmonies and inductive moods constitute a genuine technique. Every lover should be an artist. Every married man should be a lover—and strive for the fine perfection of remaining so. Compulsion dirties and degrades marriage (or any other relationship, for that matter). Necessity is the father of sexual revulsion. Delight is a mood; necessity is an imposition. You can't impose delight. If married people

---

\*Wedding night.

only had the decency, the simple courtesy, the artistry, to cease *imposing* upon one another, how much sweeter, fresher, sexual life would be! Cruel rebuffs are not taken lightly. The sexual impulses are very obstinate—abnormally proud—and insist upon being catered to. Defeated desire turns assassin and yearns to inflict vengeance. However, the day of reckoning is not of one's choosing. Due to uncontrollable circumstances, it may be long delayed. The interim between rebuff and realization is the hatching period; the time of plotting and scheming for self-satisfactions. Plotting is notoriously an underground experience. Defeated desire betakes itself to the sub-cellars of consciousness and spreads its dominion there.

Psychologically this sub-basement existence engenders a morbidity; a passion saturated with the poison of repression. The conscious mind is the keen-eyed detective guarding the gates against the assaults of the vindictive, subterranean wishes. Sometimes when the watchman is off duty or has foolishly abated his spying, the persecuted wish steals through and breaks in upon consciousness. The conflict between repression and expression is the fiercest. The endo-psychic detective hurls his conventional taboos and his inhibitory commandments at the escaping prisoner, and the released convict fights back passionately, pleading necessity.

In this emotional conflict, the mind is badly shaken, bruised by the indelicate jolts of the contestants. The whole body reports the conflict, registering each assault in some neurotic symptom. These neurotic symptoms are the external signs of inner convulsions. A great scampering and scurrying of the wishes of the underworld witnesses to the depth and despair of these outcast wishes, grown morbid through seclusion and brutal frustration. Briefly presented, this is the Melodrama of the Subconscious, the Tragedy of Morbidity.



## CHAPTER XXV

### SEX EDUCATION AT HOME AND IN SCHOOL

#### AT HOME

**D**R. MABEL S. ULRICH, in her circular, "Mothers of America" (Virginia State Board of Health), emphasizes the fact that sex is the most insistent, most inevitable force in the life of an individual, yet so far as our teachings have gone we have pretended it did not exist. We have left our children to meet the problems growing out of it with no guidance whatever. We have met their honest curiosity with silly evasions. We have vaguely hoped that when sex impulses and temptations invaded their consciousness, with them would come divine inspiration or intuition, which would safely carry them through any emotional storm.







In the past, we have had the excuse, such as it was, of ignorance. Today the time for silence and drifting is over. The war has forced the issue of *sex education*.

Sex education is far more than merely giving children the facts of existence, or warning youth of the dangers of disease. It includes the entire field of morals, of health, of manners, and of social and racial responsibility. In other words, all education which has to do with the development of character and healthful living, may be considered a part of sex education. It is well to remember that the undisciplined, self-indulgent child of today has an excellent chance of becoming the dissipated youth of tomorrow, even in spite of the most careful biological teaching. Therefore, we do not hold that telling children the truth concerning sex will alone insure ideal morals, but do maintain that it is a far step in the right direction and one which every mother must take before she can feel that she has done her part in the safeguarding of her boys and girls.

The State Board of Health of Vermont, in "When and How to Tell the Children" (Pamphlet No. 9—For Parents), points out that during the past ten or fifteen years, society has been learning many tragedies in marriage and much suffering among innocent women and children have been caused by sex diseases.



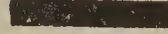
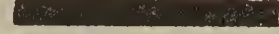


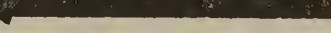



It is believed the spread of such diseases has been due largely to ignorance and false ideas concerning sex. Formerly this subject was associated with secret and vicious practices; to discuss it was indecent. Now, men and women are coming to understand that this sex function is intimately associated with the physical, mental and moral development of the individual and

#### THE AGE OF FIRST PERMANENT IMPRESSIONS REGARDING SEX

Age	No. of boys	
4- 5	16	
6- 7	108	
8- 9	140	
10-11	193	
12-13	139	
14-15	41	

The average age at which 637 men received their first sex impressions was 9.6 years.

#### THE AGE OF FIRST PROPER SEX INSTRUCTION

Age	No. of boys	
6- 7	7	
8- 9	7	
10-11	32	
12-13	93	
14-15	225	
16-17	209	
18-19	105	
20-21	38	
22-23	6	
24-25	5	

The average age at which 727 men received instruction about sex from wholesome sources was 15.6 years.

with the welfare of the entire race. The people are learning its right use is the surest basis of health, happiness and usefulness, and that it is a subject full of nobleness, purity and health. It is believed these evils will be remedied, in large measure, by sex education.

It has been discovered, moreover, that many of the disasters mentioned are due to false ideas gathered during childhood.

When a mother evades the questions of her child regarding the facts of birth or answers them untruthfully, its questions thereafter are generally directed towards other sources of information. The results are often most unfortunate. Sex education, therefore, should begin in the home not later than the time when the child asks its first question about the origin of life. It should proceed in easy, progressive stages, a little here and a little there, on through the years, until the child has become grown.

A wholesome curiosity about birth and sex exists in all normal children. It is implanted by Nature, and generally shows itself at the age of 5, 6, or 7. When a little child first asks: "Where did the baby come from?" or "Where did the kittens come from?" the mother's opportunity has come. An evasion or a falsehood now may be disastrous. When the child discovers it has been deceived, it is not likely to return to its mother when it wishes to learn more; it will go elsewhere.

Parents—both mother and father—ought to be prepared for three possible situations: (1) The child may ask some such question as is indicated above, that is, "Where did the baby come from?" (2) It may ask some utterly unexpected question, for instance, "What does it mean, 'half shepherd and half St. Bernard?'" (3) It may ask some question beyond its years—some question the answer to which it is too young to understand.

1. The parent may answer a question like the first safely, truthfully and wisely in some such way as this: "Babies grow inside their mothers' bodies, just as little birds in a nest or seeds in a flower. The seeds, when they are ripe, come out of the flower; the birds hatch from the eggs and when their wings grow they leave the nest; and babies, after they are big enough, come out from the mother's body and we say they are born."

2. If the child asks a question regarding the breed of a dog or another animal, it may be answered somewhat as follows: "The dog is called half shepherd and half St. Bernard, because one of its parents was a shepherd dog and the other was a St. Bernard dog. All little dogs must have both a mother and a father; little kittens always have a mother and a father, and so, too, there are always mother birds and father birds when little birds are born, and there are always mothers and fathers when little babies are born."



This often will satisfy the child completely. Sometimes it will be necessary or desirable to show the child some simple flowers like the sweet pea, and to continue somewhat as follows: "Do you see the fine, yellow dust in these flowers? It is called pollen. When the bee goes from flower to flower, it often carries pollen from one flower to another. The pollen contains male cells. They go down to the bottom part of the flowers, where they find the female cells. Then the new cells thus formed grow into seeds. We plant the seeds in the ground, and in the spring they develop into plants which bear flowers like these we are looking at. So in all kinds of animals and in people there are male cells and female cells, and both the mother and the father have a part in the development of the young."

3. When the child asks questions that are too unexpected for ready answer, it may be necessary to postpone a reply. But the mother should never evade the question or show amusement. She should answer promptly and directly that the question is one that she cannot explain until the child is older.

Pamphlet No. 13, of the Colorado State Board of Health, on "Sex Education in the Home and High School," is by J. E. Peabody. As he is head of the Department of Biology in a large high school, his views are of importance:

Nothing in life—he observes—is more interesting, or more worth while, or more educational than bringing up a family. Before our oldest son and daughter were five, they had, of course, asked where children come from. Fortunately, we were spending our summers on a farm, and while there the dog had her family of puppies. We told the children that the puppies came from inside the mother-dog, and from Fido they also learned the mother-dog's way of feeding and protecting her offspring. When we came back, we happened to be talking about a little one expected in the family of a friend, and the 6-year-old daughter said in the most matter-of-fact way: "Oh, yes, just like Fido." Now there is no reason in the world why any parent with ordinary common sense cannot tell the necessary facts relative to sex matters, at least so far as maternity is concerned, without introducing absurd stories of "the stork" or "the doctor's satchel."

When one comes to the discussion of the father-function, the problem is somewhat more difficult. The way we did it was

this: When our boy was about 10, he was interested in a corn-growing contest. He sent for some popcorn seed, while his father planted sweet corn close by. The corn grew so well that the boy captured the prize. But in the autumn, the corn ears were a surprise, indeed, for on the same ear there was sweet-popcorn and pop-sweet-corn.

But the corn-growing contest furnished the answer to the boy's insistent question: "What is the use of the father bird and the father dog?" He was told how the pollen had been carried from his popcorn garden to the sweet corn plot and in the other direction as well. He looked at pollen under the magnifying glass and through the microscope, and he was told how the pollen had fertilized the corn ovules. Then we discussed the mating of the male and female birds at breeding time. "Now what did you think those birds were doing?" he was asked, and his answer was, "I thought they were fighting." "Not a bit," was his father's answer, "the male animals were transplanting to the mothers the sperm cells to fertilize the egg cells in much the same way that fertilization took place in the corn in your garden. After fertilization the eggs are laid, and within the egg the baby bird is formed and later is hatched. In much the same way the little puppies were formed in Fido's body, and later were born." The father then said to the boy, "You have eyes like your mother, and hair like your father, and you have inherited other characteristics from your parents and grandparents, and these characteristics were transmitted to you through the egg cell and the sperm cell just as was the case in the corn. The sex organs in your body are for the production of sperm cells when you become a man, and if you wish to be a healthy man, you must let these organs entirely alone, except to make sure that they are kept clean." Somewhat later, perhaps at 10 years of age, the boy was told of the "wet dreams" he would probably have when older. "When those experiences come, don't worry about them at all, but just come to your father and we will talk them over together." The boy is now 15, he is spending the summer in a boy's camp, and I am fairly sure he is safe from temptation and from worry, because he has been prepared in advance.

*Anything relative to sex that can be taught a child before he is 10 years old is just so much clear gain, for the topic can then be discussed with the utmost frankness, and with no self-*



consciousness on the part of the child. It seems to me that parents often misinterpret the curiosity which young children evince with reference to the external differences between boys and girls. Children are simply seeking for knowledge which, in my judgment, it is their right to have, and which can easily be given them before the dawn of sex-consciousness.

In teaching the child, however, Michels warns that we must avoid all fables and false statements, such as those about a stork or the cabbage patch, intended solely to conceal from children the mystery of their birth. An intelligent child who keeps his eyes open will not long allow himself to be humbugged with nonsense of this kind. Witness the little boy asked whether his mother had found him in a cabbage or a flower, answered: "Oh how silly, my mother found me inside herself."

Some of the beliefs of small children as to how babies originate were collected by Prof. G. Stanley Hall: "God makes babies in heaven, though the Holy Mother and even Santa Claus make some. He lets them down and drops them, and the women or doctors catch them, or He leaves them on the sidewalk, or brings them down a wooden ladder backwards and pulls it up again, or mamma or the doctor or the nurse go up and fetch them, sometimes in a balloon, or they fly down and lose off their wings in some place or other and forget it, and jump down to Jesus, who gives them around. They were also frequently said to be found in flour-barrels ('and the flour sticks ever so long, you know') or they grew in cabbages, or God puts them in water, perhaps in the sewer, and the doctor gets them out and takes them to sick folks who want them, or the milkman brings them early in the morning; they are dug out of the ground, or bought at the baby store."

While gathered a good many years ago (*Pedagogical Seminary*, 1891), it is apprehended a similar collection at the present day would not differ materially.

Several authors advise that mothers lay stress on the pain of childbirth. To this Wittels vigorously objects:

"It is nauseating, however, to hear them whenever they speak of sexual facts, break forth into a whine about parturition; you know that type of talk: 'How I have suffered to bring you into the world.' Some day a smart child will turn and ask: 'Why



didn't they give you chloroform?' (To which we would add that of late years an unusually smart child will ask: 'Why didn't they give you "twilight sleep"?' ")

#### IN SCHOOL.

In a very recent article (November, 1920), Drs. Pierce and White call attention to the growing realization of the necessity for deciding on a plan that can be safely followed in the schools, whereby the next generation will be better prepared to meet the problems of sex relations than have adults of this age. The former policy of omission of all reference to reproduction of the species has proved to be vicious. Parents should realize that they have not the choice of whether or not their children shall receive knowledge of sexual matters, but have only the choice of whether this knowledge shall come through proper channels or shall be gained surreptitiously through information, often demoralizing, proffered by companions.

This question has been given a great deal of thought by educators, and it is believed that sex education should begin early and that the child should be led gradually through facts of reproduction in lower forms of life to an understanding of reproduction in human beings. Then would naturally follow instruction in regard to the nature of venereal diseases and methods of avoiding exposure to these dangerous diseases.

Sex instruction in schools should never be given as a separate series of lectures or courses, but be made a part of other studies. Sex knowledge should be part of physiology, biology, physical education, sociology, domestic sciences, even of history and literature, so that children will acquire the right attitude toward sex problems in an unconscious manner. There is certainly no short cut to knowledge in this field, and more harm than good will result from talks on sex matters given by poorly equipped teachers or lecturers as a special feature of class work.

It should be possible and practicable to devise a method of sex instruction whereby the ideas of the most advanced educators could be presented by motion pictures. This visual method approaches as nearly as possible the natural way in which a child absorbs knowledge, and removes largely the difficult question of the qualification of a teacher. Material for this purpose should, of course, be very carefully selected by a group of psychologists,

educators, physicians and parents; and the entire series of films dealing with this subject should be reduced to scenario form and approved by authorities in the field of medicine and education before the preparation of the series is commenced. This of necessity will take much time, and is not a part of the program that should be rushed to an unhappy result. The series should form a sequence of instruction from the time the child enters kindergarten until he leaves high school. Subsequent instruction in colleges and universities may be given by lectures and conferences, and after leaving college the educational facilities of the various state bureaus of venereal disease would be available to meet arising needs.

As regards "The School Teacher and Sex Education," Eliot in Pamphlet No. 12 (Colorado State Board of Health) states school teachers who have become interested in the general field of sex education are inquiring: "What can we do to help?" They can help, he says, in various ways, but the first word must be one of caution.

Some teachers advocate direct and specific instruction in matters of sex and reproduction. Few realize the difficulties. They are aware of the emergency; have an idea—possibly an exaggerated one—of what sex instruction can effect; they shun false modesty, and are emboldened by the thought that any information they may impart will be less harmful than the misinformation already acquired. It is true an emergency exists; that the wise imparting of information is important; that false modesty has been a hindrance. It is true also that wise information by the right person at the right time, in the right quantity, and in the right spirit can do no harm and will really help. But, it does not follow that teachers in general, nor self-appointed volunteers among them, are able immediately—without experience or preparation, and without proper textbooks—to introduce it into the schools or to teach it themselves; nor should they be permitted or authorized to do so.

The reasons for these conclusions are: First, most teachers lack the essential technical knowledge; second, they lack training in the pedagogy of sex instruction. Teachers who are eager to take up this work will better understand what can and cannot be wisely done in the schools, if they will remember and consider carefully the following well-established principles:

1. Parents ought to be the advisers of their children in these matters. Upon the parents should rest the main burden. No school can take a wise parent's place nor do for all children what parents ought to do.

2. A clear line of demarcation lies between what can and what cannot be done in the schools. There is a wide difference between personal, private counsel concerning the morals of the sex impulses (*i. e.*, the attempt directly to control sexual behavior) on the one hand, and on the other hand, the teaching of elementary scientific facts of sex and reproduction in the organic world. The latter is a proper but limited field for work in schools; the former should not be treated except under special circumstances.

3. Such information on reproduction and the laws of sex as may properly be imparted by class instruction in the schools ought not to stand out separately but should be an organic part of courses in Nature study, botany, zoology, and physiology. In fact, much of the information which might properly be conveyed to pupils in their classes may be given without the slightest consciousness on their part that what they are receiving is "sex information." The simplest facts of biology bear on our problem.

4. Such a program, even thus definitely limited, will require conservative experimenting. Experimenting of this sort can be attempted at any time, if properly authorized and safeguarded. Normal schools must undertake the definite instruction and training of teachers.

Teachers should not attempt to "introduce sex hygiene into the schools" without authorization from superintendents, and school authorities should not undertake to direct such work without taking counsel of experts in the field of education.

Even strait-laced and conservative England is becoming interested. They have a National Birth-Rate Commission, which started an inquiry into sex problems connected with adolescence, in other words, the influences which affect the welfare of potential parents.

The first witness was "Miss" Norah March, and notwithstanding the president of the Commission is the Lord-Bishop of Birmingham, she "talked right out in meeting." She said that whether or not chastity was the best preparation for parenthood



seemed to be a point on which medical and psychologic thought was not yet agreed. Personally holding that love should be the basis of marriage, she held that as a general social code the tenet of chastity as a preparation for marriage was the ideal. If marriage was delayed until late in life, chastity might be supremely difficult to many, while those to whom it was impossible were confronted with celibacy. The future might see some form of extra-marital sex relationship and parenthood finding a place in our social code. There were many more women than men in this country. The wider education of girls, their entry into the world of labor, in short, their general emancipation, all tended toward a liberation of natural impulses and a desire for freedom of choice. The right to motherhood was a doctrine that was gaining ground. It was essential that a system of education—using the word in its broadest sense—should provide emotional and intellectual compensations for those to whom the more complete life was denied. The preparation of the young citizen for worthy parenthood was no simple matter merely of appropriate instruction. Though accurate knowledge might be a great help, it did not of itself empower the individual to follow the line of conduct chosen. To begin with the ethical considerations, without a firm basis of the biologic, psychologic, social and racial relations, was to court failure. Many more parents were learning to give information to their children on such subjects as birth and sex. Supplementary instruction in biology, physiology, and hygiene could best be given in school and other classes. As to venereal disease, she deprecated strongly its prominent presentation in instruction of the young. The pseudomorality induced by the fear of the disease might even be detrimental to character. Moreover, the fear did not deter on any large scale.—(London Correspondence, *Jour. American Med. Assoc.*, Oct. 30, 1920.)

#### IN HIGH SCHOOL:

Prof. Peabody, already referred to, has had about 20 years' experience in teaching in a high school with nearly 5,000 pupils, hence his opinions are of unusual value.

He tells us since biology is required of all first-year students, and since 200 to 300 elect advanced biology in the junior or senior year, we keep 15 biology teachers busy in the instruction of these classes. In the first year we teach the children something about

nutrition and the development of energy in plants, animals, and man. Special emphasis is laid upon hygienic habits of living, *e. g.*, in the matter of the choice of food, methods of cooking, proper habits of eating, exercise and study, ventilation, and hours of sleeping. We also give them careful instruction in the fundamental principles of the reproductive function so far as it concerns single-celled organisms, flowering plants, insects, fishes, and birds. We do not think it wise to discuss mammalian reproduction in mixed classes in the first year. We are thoroughly convinced that most of these children like the subject of biology and that they think it well worth while.

We are fully conscious, however, that this classroom instruction does not reach the heart of the problem of sex education. What these boys and girls of 14 and 15 ought to know are the applications of these principles to their own individual lives, and for this purpose sex instruction should begin at least when children are 5 years old. However, we are confident that many of the boys and girls carry over from their plant and animal biology and apply to human life some definite and clean ideas relative to egg cells, sperm cells, fertilization, and embryonic development. They see how necessary is this process of reproduction if life is to be continued, and they get some conception of the altruistic meaning of this whole process.

In this first-year work we have made little attempt to teach sex hygiene so called. As I have already said, we do not think it wise to discuss in this first-year course the reproduction of mammals. I raise the question, however, whether it would not be wise to separate the boys and girls in their biology classes, giving so far as possible the boys to the men teachers and the girls to the women. Then when any intimate questions relating to sex functions come up for discussion there need be no hesitancy in talking about them.

About three years ago we started a new course in biology for the upper classes. In this advanced biology we emphasize comparative physiology, personal hygiene, and sanitation. Some 200 or 300 students are now in our classes, and in general they are a splendid lot of boys and girls. Most of them are training to be teachers in the elementary schools. Did you ever figure out the far-reaching possibilities of a teacher's influence in these senior courses—those of you who are helping to train

teachers? Let us say that 200 of these boys and girls are going to be teachers. Each half-year each one of them will probably teach 50 boys and girls. If this instruction is continued by this one group of 200 for ten years, they will have influenced the lives of 20,000 pupils. And each half-year we get a new company of recruits in our classes.

In this advanced course we discuss very frankly, even in mixed classes, the reproductive process through the mammals, and the relative importance of heredity, environment, and training. We emphasize especially the tremendous importance of right choices in marriage, and the boys and girls become so deeply interested that after class they come to us and say: "Why can't we have more of this kind of instruction? This is what we have been longing to get." To the boys we say: "If you care to remain after school, say on Friday, we will talk things over, and I will try to answer any questions you may wish to ask." The outline of my talk is as follows:

*A. The process of reproduction.*

1. Why reproduction is necessary.
2. Asexual reproduction in plants and animals.
3. Advantage of sexual method of reproduction (variation).
4. Reproduction of flowering plants.
5. Reproduction of fishes and frogs.
6. Reproduction of reptiles and birds.
7. Reproduction of mammals (including man).

*B. Hygiene of the reproductive organs.*

1. Menstruation.
2. Seminal emissions.
3. Internal secretions of the ovaries and spermaries.
4. Self-abuse.
5. Sexual relations.
6. Venereal diseases.
7. Morality and religion as factors in hygiene.

*C. Heredity.*

1. The Kallikak family.
2. The Jukes.
3. The Jonathan Edwards family.
4. The germ plasm as a heritage in trust.
5. The importance of right choices in marriage.



Before leaving the conference the boys are usually asked to answer on a sheet of paper a half-dozen questions. They are not allowed to place any mark of identification on the paper, and so we feel we are getting some rather reliable first-hand information. Thus far I have tabulated 56 answers with results as follows:

*Question 1.* "Has your father or any other relative ever talked with you in regard to sex matters?" Twelve boys answered "Yes"; 43 "No." One boy wrote, "My father wished to talk about it but never had the chance; I learned much from a couple of my friends who visit prostitutes." Another said, "From jokes and stories told on the street I had gotten only the dirty and evil side."

*Question 2.* "Have you ever been worried about seminal emissions?" Twenty-three said they had been worried, and 31 answered "No." Nearly all, however, expressed great relief on learning that these experiences, if not too frequent, should be regarded as perfectly normal. Several had been troubled so much that they had consulted quack doctors.

*Question 3.* "Have you ever heard it said that sexual intercourse was necessary for health?" "Yes" was the reply of 28; "No" of 23. Among the comments of the boys were these: "Yes, if the face is to be kept free from pimples." "Almost impossible for young men to keep from it." "This opinion prevails among the majority of pupils." "It draws off poisons from the system." "Yes, but never believed it because of the health of monks and holy men and priests who are noted for purity." One boy came to me some time after one of my talks and said that his mother wished him to ask me if his uncle and another relative were right in urging him to go to a house of prostitution in order to stop his frequent seminal emissions. I shall never forget the gratitude which the mother expressed to me for the help in saving her boy.

*Question 4.* "What have you learned today that you did not know before?" Some of the answers were these: "Nearly everything" (5 boys); "The explanation of menstruation" (8); "Development and birth of young" (15); "Harmlessness of seminal emissions" (9); "Sex relations unnecessary for health" (3); "Dangers of venereal diseases" (7); "Attitude toward girls and women" (2); "Internal secretions of ovaries and spermaries"

(7); "Difference in the effect of seminal emissions and self-abuse."

*Question 5.* "What other topics would you like to have discussed?" Most of the questions suggested were those the boys had a perfect right to have answered; among them were these: "What is the cause of pimples on the face?" "How can it be told when the egg has been fertilized?" "Are sex relations more or less harmful than self-abuse?" "What are the results of self-abuse?" "What can we do when temptation comes?" When, however, I read from the papers questions relating to sexual intercourse after marriage, I told the boys frankly these were topics that did not in any way concern them at their time of life. I urged them, however, to feel perfectly free to come to me as soon as they were engaged to be married, and I would gladly tell them, so far as I could, all they wished to know.

*Question 6.* "What is your judgment as to the value of these conferences for boys?" "Absolutely necessary" was the answer of 23 boys. Others wrote as follows: "The most essential things I have ever heard"; "The evil results from self-abuse were never so brought home to me"; "They ease one's mind"; "They frighten from bad practices"; "Should be given in all schools," etc.

At the close of each of these conferences I express the hope that each one will carry away at least five lessons he will never forget: (1) A clean and wholesome thought of the whole process of reproduction; (2) A love and consideration for his mother such as he never felt before; (3) A chivalrous feeling toward every girl; (4) A firm resolve, if possible, never again to practice self-abuse both for his own sake, for the sake of the girl who will later be his life mate, and for the sake of the children who will call him father; and (5) such a loathing of venereal disease that he will be kept in time of temptation from any possible yielding to contamination.

Our high school girls, too, need this kind of instruction just as much as do the boys. However, no man, no matter how well he may be prepared to do such work, has any right to attempt to talk to girls about these most intimate matters relating to sex. The reason for this is that although we want to remove the cloak of shame and prudery which has previously shrouded this subject, we must take great care not to tear away as well

the veil of modesty and delicacy which is necessary for its highest and finest interpretation. None of our women teachers thinks herself prepared for these talks to girls. We are, however, most fortunate in being able to secure each half-year a graduate of Vassar, and author of one of the sanest books for girls that has ever appeared. She gives two afternoon talks after school. These have proved so helpful that with the approval of the principal and the city superintendent we allow any girl in the senior class to attend.

At the close of her second talk Miss Smith asks the girls to answer a series of questions also—no girl being allowed to place her name upon the paper. Ninety-eight of these answer papers have thus far been tabulated, as follows:

*Question 1.* "Did your mother or any other relative ever tell you (a) about the coming of the baby? (b) about the menstrual period? (c) about your responsibility for the conduct of boys?" The answers to these questions were these: (a), "Yes," 21 girls; "No," 77; (b), "Yes," 42; "No," 56; (c), "Yes," 30; "No," 64.

*Question 2.* "Did you tell your mother about the last lecture? If so, what did she say?" Some of the girls whose papers were tabulated were unable to hear the first lecture, and this doubtless accounts for the fact that only 54 answered "Yes," while 28 said "No." Eighty-six per cent. of the mothers expressed hearty approval; 6 per cent. made no comment and 8 per cent. disapproved. Some of the comments of the girls were these: "Yes, it saved her a lot of trouble"; "More than pleased"; "I never discuss such subjects with my mother"; "She was shocked"; "She thought it was a good plan to have these lectures, because all mothers cannot explain these things in a scientific way."

*Question 3.* "Have you ever been troubled or frightened (a) about your menstrual period? (b) about matters relating to sex?" Twelve per cent. said "Yes" to (a); 88 per cent., "No." Twenty-eight per cent. said they had been troubled about matters relating to sex; 72 per cent. said they had not.

*Question 4.* "What have you learned from these lectures that you did not know before?" Five said they had learned "Almost everything"; 2 said nothing was new to them. Eighteen emphasized the knowledge that had been gained relative to men-



struation; 37 said they had learned much in regard to pregnancy and birth; 16 spoke of sex diseases; 14 of their new-found knowledge of their responsibility for the conduct of boys; 8 expressed gratitude for having learned the way to tell the story of reproduction to young children.

*Question 5.* "What other topics would you like to have discussed?" Here are some of the questions asked: "Formation of twins"; "Twilight sleep"; "How to bring up children"; "Cause of birth when marriage has not taken place"; "Why some women do not have children"; "Sex diseases"; "I do not know what relations are between man and woman, being brought up by very strict parents who have old-fashioned ideas concerning this topic and I am still wondering."

*Question 6.* "What is your opinion of the value of such conferences for high school girls?" "Value immeasurable," said 7 girls; "Should be given to all girls in high school" (32); "Ought not to be given to freshmen" (10); "Clears up many mysteries in the mind" (3); "Gives feeling of reverence for motherhood" (4); "Prevents girls from going astray" (2).

If these intensely human documents reveal anything it is a real hunger of boys and girls for wholesome truth—truth about the most vital matters that has been denied to them. The average parent and pastor is pitifully ignorant of the facts and does not have the needed vocabulary in which to express himself. They should, however, take every possible means to prepare themselves for this solemn duty. Prof. Charles W. Eliot and others have emphasized over and over again the duty of teachers also in these matters. To no class, however, comes a greater opportunity to do this work than comes to the teacher of biology. How can we arouse them to a greater sense of their responsibility? The reward in this service is great, for I know of no joy comparable to that of helping boys and girls find their way through the trying years of adolescence.

Judge Julian W. Mack, whose distinguished services in one of the largest juvenile courts give his every word great weight, is suggestive to parents and teachers, both in respect to the necessity for the instruction of girls and the best methods of giving such instruction. His statement follows:

"During a three-years' experience as judge of the Juvenile Court in Cook County there came before me several hundred

cases of girls, ranging in age from seven to eighteen years, every one of whom had made a misstep. Their pitiful stories have impressed upon me the vital importance of two fundamental duties that fathers and mothers owe to their children:

“First, that parents should at all times, from earliest childhood, have that priceless possession, the genuine confidence of their child: a confidence which will cause the child not merely to obey, but also to trust and to feel implicitly that the parent is at all times and under all circumstances the best friend, the most constant companion, and the wisest and most willing adviser.

“Second, that, in order to earn and to deserve this confidence, parents must be frank in responding to the natural inquiries of their child; yea, more, they must divine the unspoken question at the right time, and answer it clearly and in a manner that will invite further questions as the child develops into young womanhood. I know the difficulties involved in this, even for the more intelligent and educated parents. *But I know only too well that too many parents live in a fools’ paradise of belief that their silence spells ignorance and innocence on the part of the children.*

“It cannot be too emphatically repeated that every child mingling with other children, whether in private or in public schools, is going to learn much even at the age of ten, and, in circles in which children are not carefully guarded, even as early as seven. The words picked up, the thoughts awakened, arouse the inquiring mind. If the silent inquiry be felt and responded to by the parents a relation is established which, developed by mutual confidences, throws a protecting mantle over the little one that in many cases will guard her for life. If the spoken or unspoken query be avoided or checked the first barrier is raised, which, followed by the conventional story, easily and quickly discovered to be untrue, destroys the child’s faith in her mother. This may close her lips for all time and turn her to those who are always within reach and are only too ready to initiate her not only into a complete knowledge of but also into an experiment with the mysteries of life.

“I do not for a moment assert that all girls make missteps because of this ignorance of the facts of life. Many of mature age realize not only the moral wrong but some of the physical consequences as well. Even they, however, are generally ignor-



ant of the results of disease that too often follow the wrong step and of its permanent and terrible consequences.

"The literature that the social hygiene societies are now spreading is to the average girl, as it is to the average parent, a sealed book. The girl who has enjoyed the confidence of her parents from childhood may be spared much of this knowledge, but to those girls who have not been strengthened by this complete mutual trust with the parent even these sad stories must be told.

"Whenever a number of school children are in court for these wrongs one leader among the girls has invariably been found responsible for spreading the trouble. The boys instinctively recognize the difference in girls and know which are possible victims and which are not. From one of the schools located in an excellent region of Chicago came a girl of seventeen years of age. Her parents were an old couple, her sister a trained nurse, and her brother an excellent business man. This seventeen-year-old girl was the baby of the family and in their eyes an innocent child, the object of universal love. The family never suspected that instead of visiting one of her girl school-mates after supper, as she said she did, she was keeping an appointment with some of the neighborhood boys. Her influence led at least three other girls of from twelve to fifteen to follow in her footsteps. Two of her intimate friends were twins of the age of fifteen, and one took the keenest pleasure in these clandestine meetings. The other twin knew practically nothing about them, as not only the boys, but even the girls, recognized her innate modesty and refrained from mentioning them in her presence. The boys told me that they would be ashamed and afraid to make an indelicate suggestion in her presence, while they hesitated at nothing in the presence of the other twin and her companions.

*"None of these girls had the slightest knowledge of the physical consequences of their acts. They all realized, of course, that they were disobeying and deceiving their parents and otherwise doing wrong, but not one of them had ever been told anything about the origin of human life. As to whether this knowledge would have protected them or not I cannot be sure, but I believe, from my conversations with them and with their parents, that it would have done so. The incident became gen-*



erally known in the school and caused a complete awakening of the parents in that section of the city to a realization of their obligations. The school is located at the border line between a section occupied by fairly well-to-do people and a section occupied by the poorer classes. Every one of the boys and girls involved in this trouble came from the well-to-do class.

“In another case some half a dozen boys and half a dozen girls between the ages of ten and thirteen were involved. The leader here, again, was a girl of eleven years. She was one of the seven or eight children of a widow. This girl had never received the slightest instruction in these matters—in fact, she was the victim of parental neglect to such an extent that it became necessary to take her away from home.

“In a small suburb of Chicago half a dozen high-school girls of fourteen and fifteen years of age made a regular practice of receiving a company of their male fellow-students at their respective homes on Thursday afternoons when the mothers were away attending their club meetings. These boys and girls were all of the so-called better classes and the mothers were intelligent women. *In their club affairs these women had displayed an active interest in communal welfare, but they had forgotten to gain the full confidence of their daughters; not one of these girls had ever been told anything of the mystery of life, or understood the physical consequences of her act.*

“A group of seven little girls, from nine to twelve years of age, were the victims of a gray-haired scoundrel, all led on by a child of twelve, the first victim, who persuaded the others to follow her example. Candy and a few pennies were sufficient inducement in this case.

“In another case, a group of half a dozen girls of fourteen and fifteen years of age made it a custom, after church on Sunday morning, to visit a man who gave them ice cream and played music for them, and the parents thought that they were going for a walk!

“One little girl of nine years of age, who was kept in ignorance of these things by her parents, was the victim of more than a dozen boys, ranging in age from ten to sixteen. She was a beautiful, innocent child.

“A widowed mother with two beautiful daughters of fifteen and seventeen made no attempt to instruct either of them.

She was a weak, pleasure-loving woman, and the natural results followed. Both girls were faithful attendants at Sunday school and church, but were easy victims of their school companions. The younger girl was subsequently responsible for leading three of her girl Sunday-school mates into like adventures.

"A mother disregarded some rumors that came to her about her eleven-year-old daughter. *She pooh-poohed them, declaring that she knew her child, and that the child's 'innocence' and ignorance were absolute protection to her.* The mother's discovery of her mistake was something heart-breaking to witness.

"Now what is the lesson to be derived from these and many like experiences? As I said before, one can never be sure that knowledge of the physical consequences will be complete protection to a girl. But that knowledge she should possess, and possess early as a first covering. While knowledge alone, without character, will never save, the fear of consequences will oft-times brace up a weak girl to resist to the uttermost.

"Some wise teachers have been able to impart much valuable information in the regular course in physiology and hygiene to high-school classes as a normal and natural part of the course without any undue emphasis. The task, however, is an extremely delicate one, and, except in the hands of the wisest and most experienced, is apt to be full of danger.

"Instruction of this kind, particularly to those under the high-school age, must be individual; it cannot therefore be given by the already overburdened public-school teacher.

"The greatest care must be exercised in imparting such knowledge. Many parents are unequal to the task and should call to their aid the wise family physician. Moreover, as the children whose parents cannot or will not instruct them or cause them to be instructed by the physician are a source of danger to the children of others; as children cannot be raised in hot-houses nor kept from contact with others—sooner or later most of them will go to school, public or private; as one vicious child will influence many companions, the importance of mothers' associations in connection with every school and every grade of the school cannot be too strongly urged. Here can be gathered those responsible for the children's associates; here a wise parent can help the ignorant and thus build up a double barrier about her own child.

“The intelligent parents owe a double duty: they owe a duty to their own children and to other children, and the duty to the other children is not only from a humanitarian standpoint, to fill the place of the unworthy or ignorant parent, but indeed from the selfish standpoint: to protect their own children. Even the best and wisest mothers frequently blunder. The carefully-trained and only child of a most excellent woman created a great sensation in a select school in a Western city by immediately confiding all that she had learned at home to her schoolmates, male and female, with a good many embellishments.

“An innate or inbred modesty not only makes a girl in every way lovely, but it is also her greatest shield; her sole completely reliable protection. A girl must be taught that to give even the tip of a finger to a boy is wrong; that she will awaken in him a desire which some boys at least will lose no opportunity to satisfy; but, further, she should be told why, and what it means. *Modesty and ignorance have too long been thought to be synonymous. Knowledge of the dangers may in itself check a growing forwardness; it cannot but strengthen and doubly shield those who are of pure thought.*”



## CHAPTER XXVI

### THE WONDERFUL STORY OF LIFE\*

#### A Mother's Talks With Her Daughter Regarding Life and Its Reproduction

THIS wonderful story, Helen Elizabeth, is written particularly for you and me. We are going to read it together because I want to be sure that you understand the things which we shall find in it. If, as we read, there are any words or sentences which puzzle you, which you do not understand, be sure to ask about them. I shall try to answer questions for you as well as I can.

We are going to read, you and I, about wonderful and beautiful things. Now, there are many, many beautiful things in the world. That maple tree out in the front of the house, which is so fresh and green; the rose bush in the garden just covered with roses; the birds which sing outside your window every morning; and the fishes, if you catch a glimpse of them in the cool, dark waters of the little pond just outside the town, the silvery fishes, which dart to and fro so quickly—all these things are beautiful. If it were not for them and for many other living things this would be a very dreary and unhappy world to live in. What would the world be like if there were no plants, no fishes, no birds, no animals, or men upon it? Nothing but the unchanging rocks, the drifting sands, and the lonesome waters. You and I would not like to live in such a world.

Already probably you have noticed that all living things change almost continually. If a thing does not change we say it has no life. That rock beside the road is just the same today as it was yesterday, and if we come back next year it will, as far as we can see, still be the same. It does not grow at all. The pile of sand in which you and your friends play changes only because you dig holes in it; the sand itself does not change. But flowers and trees, and fishes, and you yourself, Helen Elizabeth, are never quite the same one day as you are the next. Yesterday you were not as big a girl as you are today, and you are not as big

---

\* United States Public Health Service.

today as you will be tomorrow. We human beings grow from childhood to youth and from youth to womanhood, and then we gradually grow old and finally die. All living things, plants and animals, do the same.

Since all living things change and finally die, it is necessary always that new plants and animals be created to take their places. If new plants, fishes, birds, animals, and people were not constantly produced, the earth would soon be left without any. In a short time it would all be a vast desert without a living thing on it; no plants, fishes, birds, animals, or men.

Now, this does not happen, because all living things multiply or repeat themselves in their offspring. Every kind of plant, every kind of animal in the world, has the power to produce baby plants and baby animals like itself. The grass makes or brings forth new grass; the oak tree new oaks; the pretty violets and all the other flowers, new flower plants; the chickens, little chicks; cattle, their calves; dogs, their puppies; and people, their babies.

How they do this is a wonderful interesting story. I am going to tell you about it—tell you how the flowers make the new little plants which will produce flowers next year; how the fishes which we eat for breakfast or dinner have already provided for the little fishes which will take their places; how the birds arrange so that there will always be birds to come to us in the springtime; and how your little baby brother and you yourself, Helen Elizabeth, came to be born.

This story of reproduction, as we call it, is a wonderful and beautiful story. It is beautiful because it tells about living things which, we have agreed, are among the most beautiful things in the world. It is wonderful because it tells about wonderful things. Men have made many marvelous inventions, like automobiles and steamships and airplanes; but they have never been able to invent anything so wonderful as the simplest little plant or animal which may reproduce itself. Yet unless God had given all living things this power to reproduce, plants and animals and men would long ago have disappeared from the earth. That is why we say this story is not only beautiful and wonderful; it is sacred.

About sacred things we do not talk lightly. We do not talk about them with other children, for many children do not know how wonderful and beautiful this story of the reproduction of life is. But you may talk about it freely with your father and me. We

are always ready—yes, anxious—to help you understand and will always answer your questions as well as we can.

\* \* \* \* \*

We have agreed, Helen Elizabeth, that living things are among the most beautiful things in the world, and that because all living things change and finally die there would soon be none of them left unless new ones were produced. How sad it would be if all the green grass and the beautiful flowers, and the birds, and all the animals should disappear. If you will listen very carefully I shall tell you why they do not disappear.

First, we shall consider the flowers. How many, many different kinds of flowers there are. There are violets and dandelions and buttercups and roses and sweet peas and daisies and forget-me-nots and lilies and pussy-willows and hollyhocks, and perhaps you can name a lot more. All these flowers are beautiful, and you and I would be very unhappy if a time should come when there were none.

Now, flowers come from plants, and each flower has its own particular plant. In order to have a wild rose you must have a wild rose bush. In order to have dandelions there must be a dandelion plant. Sweet peas do not grow on apple trees or currant bushes, but on sweet-pea vines. You know that as well as I.

The sweet-pea vine, like other plants, has roots by means of which it draws water and nourishment from the ground. You know that if you cut off the roots the vine will die. It also has leaves, by means of which it gets air, and you know that if bugs continually destroy its leaves it will die. You know that it has a stem which holds up the leaves and flowers, but that without the sap from the roots the stem will die. You know that it has flowers, lovely and sweet, beloved by bees and girls, and that after the flowers have faded and their petals fall, the little stumps which are left change into pods filled with seeds.

These seeds, if planted and given water, air, and sunshine, will sprout into young sweet-pea vines. So every year when all the old sweet-pea vines have died we can still count upon new sweet-pea vines starting from the pea-vine seeds. These new pea vines will bear sweet peas, just as pretty and sweet as the old pea vines did.

Did you ever think what a wonderful thing a seed is—that a



little pea seed has in it something which will sprout and grow and become another plant, and something also which will surely make that plant take a certain form? Its stem will have tendrils; its leaves will be pea leaves and not oak leaves or tea leaves. It will bear flowers which will surely be sweet peas and not hollyhocks; surely white or pink and not blue or yellow; and which will have a certain odor and no other; and which will be followed by pea pods, not by peach or sunflower seeds. All of that and much more is wrapped up in the tiny seeds.

The seeds are so very wonderful, Helen Elizabeth, that I am going to tell you more about them. Every part of a pea vine or any other plant has a particular work to do. I told you a little while ago why roots were necessary, why leaves, and why the stalk. They all have a very definite work. But how about the flower? Is it only a pretty decoration for you to put in a case on the dining-room table or for me to wear to parties? No; the flower, like the leaves, has a definite work. It is to help form this very wonderful little seed.

In the very center of all flowers there is a stalk called the pistil. And what is a pistil, you ask? Well, I will try to draw a picture of a pistil for you. Or wait; perhaps we can find it here in this flower.\* That will be better, because my pictures would not help you very much, I am afraid.

Here is the pistil. It is this upright part in the very center of the flower. It is carefully protected there. As you see it broadens out at the lower end. There are tiny passages from the top of the pistil into the broader part at the bottom. Now, if we cut through this broader part, the little green ball or stem at the bottom of the flower, we will see a number of little white dots. These dots or egg cells, as we call them, will in time grow into seeds. The tiny passages in the pistil lead to the egg cells.

Have you ever looked at a flower carefully? I know that you have been very close to one many times, and have, in fact, stuck your nose deeply into it in order to get all its fragrance. Now, sometimes when you have done this I have noticed that some yellow dust from the center of the flower has been left on your nose. It has looked very funny there. This dust is called pollen. It doesn't seem of very much importance to you and you brush it

---

\* Among the flowers particularly adapted to use for illustration are: Sweet pea, apple blossom (and other fruit blossoms), lily, wild rose, tulip, etc.

off quickly. Still, this pollen plays a most important part in the making of flower seeds.

When the bees and the butterflies fly into the center of the flower seeking honey, their feet and wings get covered with the fine yellow pollen, just as does your nose. Then, when they fly to another flower some of this yellow pollen dust is brushed off on top of the pistil as they pass by. But the pollen dust does not stay on top of the pistil. Through the passages in the pistil of which I have told you it sends a little shoot down into the little white dots or eggs. This process is called fertilization. After they have been fertilized the eggs enlarge and become seeds. Unless the pollen finds its way to the pistil the little white dots can never become real seeds. But if it does find its way, with the help of the bees or the wind, the little white dots become seeds, and these seeds, if planted carefully, will grow into fine flower plants and bear the pretty flowers which bring so much happiness to you and me.

\* \* \* \* \*

In our last talk, Helen Elizabeth, I told you about plants—how each particular part, leaf, stem, root, and flower, has its work to do. We love flowers so much that we were particularly happy to know about flower seeds. Even if all the plants now living should die, these seeds would grow into new plants with the same beautiful flowers. And I told you about how the seeds were made—the little specks of pollen finding their way down through the tiny passages in the pistil to the little white eggs, which then grow into real true flower seeds.

Today I have another interesting story to tell you. It is about fishes. I wonder how much you know about fishes, Helen Elizabeth. You know they live in the water, and you like to see them swim about. But you don't know what fishes do in their watery homes, and you don't realize how they live. There are thousands and thousands of fishes in the world, however, and many people depend on fishes for food. So you will see that they have quite an important place in life.

Let us take one kind of fish—the salmon—and I shall tell you some of the things I know about it. Salmon live in the great Pacific Ocean and spend most of their lives far from the sight and knowledge of people. They swim about in the deep water looking

for food. Day after day they spend in this way, eating food and growing bigger and bigger.

There finally comes a time when each salmon feels an impulse, which it doesn't understand, that it has a work to do up a fresh-water stream. So the salmon turn toward the land and start up the rivers and brooks which lead from the sea. By thousands and tens of thousands they come. Fishermen catch many thousands of them, which are put into cans and sent all over the world for you and me and millions of other people to eat. You will remember that we had some salmon for supper not so many days ago.

But, happily, not all of the salmon are unfortunate enough to be caught. The lucky ones press on up the stream, swimming hard, growing tired but always intent upon that great business which brought them in from the sea. They swim up the swiftest rivers, and though sometimes the water carries them back they try again and again, until they reach a very narrow stream far up among the cool, shady mountains.

Do you wonder why salmon work so hard to reach this narrow little stream, when they might be wandering happily in the ocean? Just as the rose bushes produce rose seeds from which new rose bushes will come, the salmon must produce little salmon which will grow up some day. Unless they did this, there would soon be no salmon left. But salmon cannot produce their little ones in the dark waters of the sea, so they must come up into the sunny, clear, fresh-water brooks.

After days of swimming, as I have said, the salmon reach the cool, shallow mountain streams. Here the mother salmon (for there are father and mother salmon) can safely do her work in the making of baby salmon. She selects a bit of sandy bottom in the cool, clear stream, and with her tail scoops out a little hole. Then, hovering over it, she discharges into it from her body a stream of little golden beads—her eggs. She does this at a number of places on the sandy bottom. This is her part toward keeping the salmon family alive.

The mother salmon does not know, as we do, that not one of those eggs can hatch out into a little baby salmon until a father salmon has done his part—has furnished something from his body for it. He has come up the river also driven by the same feelings as sent the mother salmon up from the ocean. After



the mother salmon has given up her eggs, and they lie in the little hole which she has scooped out, the father salmon hovers above them and discharges over them from his body a thin, slight substance called milt. This milt carries thousands of little wriggling bodies called sperms, much smaller than the pollen grains of the flower. But milt has the same purpose and work to do as the pollen grains. By it the mother fish's eggs are fertilized, just as was the white dot or egg in the flower. One of these little wriggling bodies enters each of the eggs that the mother salmon left. In this way each egg contains a part of the mother's body and part of the father's body. It at once begins to change and grow and finally becomes a baby salmon. If it had not been for the milt, this could not have happened.

These baby salmon grow, and then gradually not all, but very many find their way down the brooks and rivers and out into the sea. In the great ocean they live their childhood lives as did their fathers and mothers. There they wander about and have their fishy adventures, and when the proper time has come they in turn seek the clear, fresh water in the mountain streams where the sand is smooth and the daylight bright.

\* \* \* \* \*

I am sure, Helen Elizabeth, that you know more about the habits of fishes than you did when we began our last talk. You now understand that the salmon come up the fresh water streams from the great Pacific Ocean, and that where the sand is smooth and the sunlight bright the mother salmon lays her eggs. Only if the father salmon comes along afterwards and discharges his milt over these eggs will they grow into little salmon. Of course all fishes do not travel as far as the salmon. Some spend their whole lives in the ocean; others never go down into the sea; some stay in the lakes and ponds. But all mother fishes lay their eggs where the father fish can pour his milt over them, else there would be no new little fishes and soon no fishes at all.

You are, I think, better acquainted with the birds than you were with fishes, and I know you want to hear their story, too. How glad you have been to see them again after the cold winter. You have missed their bright colors and their clear songs. But, sure as the spring comes, the birds return from the warmer south-land, where they have spent the winter, and now you hear their

joyous singing each morning as they welcome the bright sun of the returning day. They are saying that it is good to be alive in such a world, where there are shady trees and beautiful flowers and fat, juicy earthworms.

But the birds are singing not always to you and me or to the bright sun. They are singing to each other and saying that it is not good to be alone in the world. They are saying that there must always be birds in the world to make people happy. So finally each male singer will find a female bird who agrees with him, and they will agree to build a nest and have some baby birds.

How can they do it? Ah, that is a great mystery that they don't understand. But they set about their business and play and work together, these two, apart from the rest of the birds in the world, intent on making a nest. And the more they are together the more they love each other, and the more they love each other the more they become tender to one another. Finally they reach a point of tenderness at which they merely flutter about one another, and you will occasionally see a father bird on top of a mother bird, snuggling as close to the mother bird as he can. She seems very willing to have him do so. And this is the reason: As they are together there passes from his body to hers, through parts provided for this purpose, a fine stream, much like the stream of milt which the father salmon poured out over the salmon eggs, a stream bearing thousands of the same kind of little wriggling bodies, far too small for us to see with our eyes. But each of these wriggling bodies carries in it something of the father bird which enters the seeds or eggs in the body of the mother bird, to fertilize and make them alive, so they can, with proper care, later become baby birds.

Without that little portion of the father bird, no eggs could ever hatch. The father bird makes the eggs fertile. That means they can grow into baby birds and finally break through the shell. The hen can lay eggs, which for your purposes and mine, to make omelettes or soft-boiled eggs, are as good as any. But unless she lives with a rooster and receives from him the little wriggling bodies which make eggs fertile, she can never lay an egg that will hatch into a chicken. An egg that will not hatch into a chicken is not worth anything at all to a mother hen. She might just as well have a stone or a door knob to sit on.

It is the same with the mother bird. While she or the father bird might either of them build a nest alone, and she could even lay an egg alone, neither of them could possibly produce a baby bird without the help of the other. Thus it is that they will find their greatest happiness in life living together and loving one another, and in raising and caring for their baby birds.

\* \* \* \* \*

When you reach high school or college, Helen Elizabeth, you may begin to study Latin, the language which the old Romans used to speak and write. Perhaps some day you will come across the Latin words which were written many years ago and which mean, "Every life comes from an egg." You may be surprised to know that this is true for almost all living things. You understand or believe that the fish comes from an egg and that the bird does; and you can even understand what I mean when I say that the seed of a plant comes from an egg at the base of the pistil. But you may think that puppies and calves and colts and babies do not come from eggs, because you have never heard of such a thing and never saw the egg of a dog, cow, horse, or woman. There are such things, however, and all of these young animals come from eggs just as truly as do chickens and birds.

Now, why is it that, if animals come from eggs, you have never heard of or seen the eggs? The fact is that the eggs of the higher animals are too small to be seen. You are surprised, of course, that the egg of so large a creature as a horse or a cow, or even an elephant should be too small to be seen, while a little bird like a humming bird lays an egg as big as a pea. The reason is this: What we call the bird's egg really contains two different things. First there is the little egg itself, which is to grow and become the young bird. Secondly, there is food enough inside the shell to supply the little bird while it is growing to the age and size at which it will hatch. The stored-up food inside the shell is the part which is good to eat. Just as it is good food for the little unhatched bird, so it is good for you and me. The egg of the cow and other animals, on the other hand, does not contain food, so it can be very small—so small that only a microscope would enable you to see it.

These eggs are so small that, unlike the hen's egg, the fish eggs, and the rose's egg, they cannot, even after they have been



made fertile, live outside the animal's body. They can only be cared for properly within the bodies of their mothers. After a time, when they have grown into young animals, they are born into the world. Even then they are still pretty helpless and have to be cared for during long periods—puppies for weeks, babies for years. In fact, you, yourself, Helen Elizabeth, with your nine years, are not yet able to take full care of yourself and to make your own living. Your father and I still have the happiness of looking after you and having you for our child. And it is a wonderful blessing that parents do love to look after and care for their children. If the children are good and honest and truthful and brave, it gives the parents the greatest sort of happiness, much, much greater than any happiness that can come from money, pleasures, parties, fine clothes, shows, or any other thing.

You, Helen Elizabeth, are a great happiness for father and me, because you have been a good girl, and we shall take the greatest care to look out for you until you are able to take good care of yourself.

\* \* \* \* \*

In our last talk, Helen Elizabeth, I told you that the eggs of all baby animals are very small, and that baby animals can be cared for properly for a long time only within the bodies of their mothers. Now you are wanting to know how the eggs get inside the mothers and what causes them to grow. For just as the chicken's egg begins inside of the chicken, the fish egg inside of the fish, the sweet-pea seed inside of the pea pod, so the eggs of all baby animals and of the human baby begin inside the mother.

There are, as you know, many different parts in your body. Just as the plant has its roots and stems and leaves and flowers, each for a special purpose, so the human body has many parts, each with its work to do. The heart is to pump the blood about the body; eyes are to see with; teeth are to eat with; lungs are to furnish fresh air or oxygen to purify the blood. And there are many other parts such as the stomach and brain and muscles and skin, all with their special work.

Now, within the lower part of the woman's body, far from injury and well protected, are two parts called ovaries, whose work is to produce eggs. These ovaries are in some ways her most precious possession. Without them she could not have grown into a woman. Without them she could never become the

mother of charming babies. For out of the eggs which the ovaries produce, develops, under proper conditions, the new life of the little baby.

No egg, however, will develop into a baby until it is fertilized, until it is made to live by receiving into itself something from the father. You have been told how plants are fertilized when the pollen, which is the father part, is carried to the pistil of the flower by the bee, and travels down through it to the little growing seeds or eggs which are produced by the mother part. You have heard of the father salmon that swims hundreds of miles in order to pour out his milt upon some salmon eggs left by the mother salmon. You have seen birds loving one another, and have been told that at times a little stream of life-giving fluid passes from one to the other as they do so. This fluid contains the little wriggling bodies which fertilize the eggs so that they will grow and produce baby fish and baby birds. The eggs of the salmon and the birds hatch outside of the mother's body.

Mammals are animals like cows and dogs and cats and human beings, which carry their young in their bodies, sheltered and nourished deep in the mother until they are born. For that reason it is necessary that a life-giving body, like the little wriggling things in the milt of the fish, be placed by the father in the body of the mother where it will have a good chance to find the egg in the place provided for it. And, wonderful to tell, human fathers and mothers, and the fathers and mothers of other mammals are so made that this is possible. The father makes the egg within the body of the mother fertile. Then, in the safe nest which has been made there, the egg grows and develops until it is strong enough to live in the air. When the little animal comes out of the mother nest, we say it is born.

When a man and woman love one another very much, and each thinks the other the dearest and most wonderful thing in the world, they get married and live together. Then, if they have followed God's laws, they may some day make their home happy with loving children. And there is nothing, Helen Elizabeth, which makes a home happier than loving children. Your father and I know because we have you.

\* \* \* \* \*

I feel that I have told you, Helen Elizabeth, about as much as your years will allow you to understand. But when you are

12 or 13 years old I may get another book for you. Meanwhile, if you have any questions to ask about any of these things, bring them to me or to father, and do not take them to other children. Many children are not told about such things by their parents, and what other children think they know may not be true. For that reason we do not talk about these matters outside the home.

You will understand better now, I hope, why your father and I love you so very much. It is because we have given you so much of ourselves. You were born because we loved each other. And while father and mother fishes do not worry whether the little fishes live or not, we have cared for you very carefully until you are now getting to be a big girl. We shall continue to care for you, giving you food and clothes and a little room for your own, giving you all we can to make your life happy until you are ready to take care of yourself. It is our greatest happiness to do these things for you.

We want you to be happy—very, very happy—while you are in our care. But we also want you to realize that we have given up many things because of you. When you were very little, before you left the warm nest inside my body, I carried you about always with me for a long time, and then after you were born, it was always easy to care for you. One time you were sick, and your father and I spent all the night trying to make you better. And there were other times. We were happy to do these things because we loved you so much. And you are happy and love us just as much as you can because we have done so much for you.

You have, I know, Helen Elizabeth, found the story about the continuation of life—whether of flowers, of fishes, of birds, or of human beings—an interesting and wonderful story. You even realize a little why I have called it a sacred story. As you grow up you will understand better. For in all your life you will never find a story more beautiful or more wonderful. Not all people realize this; not all people see the beauty and the wonder of it. But you have already come to know a little, and in the years to come may you realize more. That is your father's fondest hope—and mine.



## CHAPTER XXVII

### MARRIAGE A PROFESSION\*

MARRIAGE is a profession which men and women take up presumably for life, and it is a most important profession, since it is to influence future generations for good or ill. Unless a woman and a man enter this profession with absorbing interest and an intense feeling of love and devotion, it cannot be made a success. They may *get along* after a fashion, but the relation will be a farce, compared to the real drama of an earnest love marriage.

Society today educates young women to control and subjugate strong feeling; it is not *good form* to love intensely, and any element of passion is vulgar in the eyes of Dame Fashion. The physical phases of marriage are never discussed by the modern young woman of the *cultured* classes with her mother—only the social and financial features. The average girl of the *upper walks* of life is therefore dwarfed and stunted in her emotional qualities and absolutely ignorant of the masculine nature when she goes to the altar.

Meanwhile the man whom she selects for a husband has, as a rule, learned all he knows of feminine emotions and passions from women in other walks of life. His father and his mother have never talked to him upon such subjects; they would consider it *highly improper*. He has read French novels and witnessed modern melodramas—and half unconsciously he has formed an idea of all womankind in accordance with these heroines of the stage and the novel.

He chooses a girl of *spotless reputation* for his wife, yet he treats her as if she were a Sappho, a Du Barry, or a Phryne, because he has never been educated by any wise, good, sensible man or woman on this subject of vital importance, and does not know that refinement and self-control are the guardian spirits who stand by the portal of nuptial happiness, and that to frighten them away is to transform Paradise into Purgatory.

Place the formal-minded girl of undeveloped emotions and absolute ignorance of human nature in this possible Paradise

---

\*By Ella Wheeler Wilcox in the "New York Journal."

with the uncontrolled man devoid of ideals, and without knowledge of the intricacies of chaste femininity—what but chaos can ensue? *And who is to blame but the fathers and mothers of both bride and bridegroom?*

It is a cardinal sin to bring a girl child into the world, to rear her to womanhood and accompany her to the altar, *ignorant of all that marriage does, must, and should mean.* It is a cardinal sin to allow a son to reach manhood years without knowing all that pertains to good, pure, refined womanhood—all that chastity, wifehood and motherhood mean to a woman. It is a crime to stunt a girl's emotional nature, and to allow a boy full use of all his masculine propensities, without wise counsel and guidance. *And I boldly affirm it is upon the fathers and mothers of the land that nine-tenths of the blame for all the unhappy marriages of the world rests.*

The bride who has been naturally, sensibly and properly educated by her mother, the bridegroom who has been the intimate friend and confidant of his mother and of a broad-minded and refined father, will not disillusion or disgust or antagonize one another during the honeymoon, nor thereafter. *It is the ridiculous false modesty of parents and their shameful indifference to a subject which is the root of all existence that makes so many marriages failures.*

*The Institution of Marriage.\**—Will the institution of marriage as we know it today exist forever? No one can tell. Some believe it will; others believe it will not. The conservatives believe that it will continue in its present form, without any change, forever and ever; the liberal believes that its essential features will remain, but that it will undergo many important transformations. The radical believes that marriage as we know it today is a decaying institution and will cease to exist within a comparatively brief period.

Whatever your opinions may be on the subject, the fact remains that marriage, the monogamic marriage, is with us and will remain with us for some time to come. Being with us as a practically universal institution we have to make the best of it. We have to deal with it, and it is the task of the wise man and the humanitarian to see if we cannot do away with or minimize its disagreeable features, if we cannot level or at least partially

---

\*Dr. Wm. J. Robinson in "*Married Life and Happiness.*" Critic and Guide Co., New York.

smooth the rough road, if we cannot make married people, if not perfectly happy, at least as happy as they can be, under present conditions.

It is impossible, absolutely impossible, to decrease the misery or increase the happiness of *all* married people. For there are married people who should never have been married. I want to stamp as a falsehood the statement that *all* men and *all* women should be, ought to be, or must be married, or that *all* men and *all* women are better off when married than when single. *This is a biologic, physiologic and psychologic falsehood.*

A great deal of this world's misery arises from the stupid and vicious attempt of legislators, theologians, moralists and social up-lifters to put all mankind in the same mould. They seem never to be able to learn that human beings are not stones or pieces of wood, and cannot be handled alike, but must be treated individually and must be permitted to act individually. To take but one or two examples:

*The Maternal Instinct.*—You will hear it said over and over again, you will see it repeated in books and tracts and philosophies, in novels and in poems, that the maternal instinct is a universal instinct, present in *every* woman's breast. *As an absolute statement it is false.* It is true that most women would like to be mothers. It is true that some women burn passionately with the desire to cuddle to their breast a child which they can call their own, but it is also true that there are a great many women who are quite indifferent to children, who do not care to have any; and there are still mothers, who detest children. Whatever the biologic reason for this condition may be, the fact is indisputable. Naturally, when such women marry and become mothers there is a great misery all around. Such women should never have married, or if married, should never have become mothers.

*Another Example.*—It is true that practically every woman needs an emotional outlet, but it is not true that every woman needs or wants a man. In fact, to some women men, not only one particular man, that is their husband, but all men, are obnoxious and repulsive. When such a woman gets married there is the devil to pay; mere advice cannot remedy the trouble.

Yet, we must bear in mind that there are men and women who, for various reasons, physical, mental, psychologic or moral, are absolutely unfit to be—should not be permitted to be—fathers



and mothers. And there is a smaller class who, also for various reasons, are not fit to be husbands and wives, not fit to live in matrimony. Such people should never have married, or having married, should not only not have permitted themselves to become progenitors, but should have separated at the earliest possible moment.

But taking humanity in the mass, these people constitute only a small minority. The majority of the people are fit to be parents, the trouble lying *outside* of them, that is, in the environment and our social-economic conditions and our artificial moral code, and above all, *in ignorance*—ignorance on the part of the man and the woman as to what factors are necessary in order to establish and to maintain a happy or at least a fairly happy relationship, a relationship which should last from the wedding day to the time when the angel with the black draught makes his appearance. And to such people this chapter, carefully read, will prove unquestionably of benefit; it may be the turning point in the lives of many married couples; it may prevent a home on the point of disruption from being disrupted; it may bring people who have been drifting apart back into a closer union; it may help *you* to understand the causes of your quarrels and bickerings, and headaches and sleeplessness and restlessness and discontent; it may help to lift the veil of many of the mysterious causes of unhappiness in married life.

The first thing people who are about to be married or who are married have to get through their heads is that there is no such thing as *absolute* liberty for the married; in fact, there is no such thing even for the unmarried. Absolute liberty is a chimera of the shallow thinker; absolute liberty can only be for a person if he is all alone on a desert island or continent. As soon as there is another person on that island there can be no further question of *absolute* liberty. The liberty of the one becomes limited by the equal rights of the other. If this is true of the unmarried, it is certainly true of the married. Those who do not believe in the “*give and take*” principle should not get married.

With the great majority of men the dilemma of delayed marriage is one that sets them between the dangers of an enforced continence and of an indulgence, the temptations and risks of which they cannot avoid. They become definitely soiled by their

mode of life. Their outlook upon the world of sex and womanhood becomes an outlook from the lowest plane. Their most intimate associations with members of the opposite sex are of a kind that implant in them the opposite qualities to those that lead to happiness in married life. Their freshness and the cleanness of their youth are taken from them by these women, and their wives have to be content with the worn and soiled manhood that is left. Sometimes such men not only bring degraded tastes, but they also bring venereal disease as a part of their marriage gift. *There is, in fact, no greater secret tragedy in modern life than the number of women who suffer or have suffered long-lasting pain, sickness and shame owing to the venereal disease they have contracted from their husbands.*

Want of sex education is a common cause of failure and tragedy for women in marital life. Many women know little or nothing of their deepest desires, idiosyncrasies, prejudices, and aversions, until they are suddenly and often irrevocably, confronted with specific difficulties arising in wedded life. For the lack of plain physiological knowledge many wives injure their health, impair their reproductive power, threaten the life of the coming infant, and cause unhappiness to their partners. Many estrangements between man and wife are traceable to ignorance of sexual hygiene, a perverted ethical attitude, a fantastic tradition, or an old wives' fable. *The ignorance of many so-called well educated people is almost incredible. In some not very rare instances grave physical injury to the wife or to the husband is due to ignorance.*

*Faulty Physiology and Marriage.\**—Marriage is essentially a physiological condition. Its contentment and satisfaction is founded upon sound physiology. Without sound physiology genuine satisfaction cannot be obtained. Hundreds of cases of healthy and educated people who become dissatisfied with their marriages or become nervous, anxious, worrying, neurasthenic or even hysterical, do not know the real cause. The unhappiness and misery that is caused to the married owing to faulty physiology is terrible, *and the ignorance and folly of it all is just as terrible.* All this worry, anxiety and mental fever is not necessary in life. All the unhappiness it entails is not necessary. With sound physiology it does not exist and there is sound foundation, and contentedness of mind. *Neurosis is probably altogether*

---

\*By Dr. G. T. Wrench in "*The Healthy Marriage.*"



*impossible with healthy physiological marital life. It cannot be too definitely stated that the happiness of married life largely depends upon physiology, and that there is nothing more certain than that marital unhappiness in a great number of cases is due to faulty physiological understanding and adjustment.*

People are wont to conceal their married troubles and often to exhibit a false appearance of happiness and even to do their best to deceive themselves. They are ashamed to be unhappy in their married life, and perhaps rightly so, for unhappiness argues a bad choice and judgment in what is generally the most important matter in their lives. Very little has been written upon such unhappiness and very little is said. Consequently, there is a good deal of ignorance upon the matter, which is the debt we pay for the feeling that we do not care to make these intimate matters public. Nevertheless, we err on the side of too great secrecy and its complementary ignorance, and a psychologist, who has studied these matters, is often depressed, when cases come into the courts of law, by the grave ignorance of human nature which our law and its executors display. However much we may deplore it, the fact remains, that lesser or greater disabilities arise and occur with sufficient frequency to be constantly observed by the psychologist instructed in this important branch of human nature. He notices many cases of unhappiness in married life which a little knowledge might avert. While it is true that the medical profession shares somewhat in this widely spread ignorance—nevertheless, a doctor, is, as a rule, more learned in the subject than other men, and, therefore, I would always advise people who are not happy in their married lives to consult a doctor.

Many minor disabilities and nervous affections may arise. Wrongful deprivation of marital rights may have the same evil effect, even though the deprivation is mutually agreed to by the two partners. Sometimes also it is advised for some reason by a doctor not versed in psychology. I would state here that only in very rare cases is such advice justified, and that it is generally given with far too facile an ignorance of the mental and moral effects that result. Marriages, previously happy, may be utterly ruined by such advice based upon some weakness of the wife which may itself actually be due to a mistaken notion of marital physiology. With married folk themselves, moreover, there is an



increase of folly in this respect. This is especially true amongst the upper classes, amongst whom the women seem to possess often an acquired aversion to being natural in these important functions. Infected by the exaggerated estimate of the individual, marriage becomes to them a means by which they can secure the most pleasure and the greatest degree of escape from what they hold to be the troubles of life. Pregnancy, childbirth, and suckling they regard with dread, and the relations with their husbands, which naturally lead to such issues, they curiously distort and pervert. The results to them are by no means fortunate, for amongst this class of wives one can find most of the restless, irritable, nervous creatures among women. Nature punishes those who depart from a rightful regard of her demands. People may obey and base themselves upon nature and build up an art therefrom, but they may not check and pervert her. *There are restless, irritable wives and husbands in abundance; and one can state positively that the major amount of the nerves and hysteria of the present day may be traced to faulty sexual hygiene.*

*The Criminal Lack of Preparation for Marriage.\**—The future historian who will deal with the absurdities of our present day so-called civilization will have a hard task before him; one man's lifetime will be barely sufficient to deal with them all. For there are few things in our social-economic and political system that are not done stupidly. I am sure that one of the absurdities that will strike the future chronicler's sense of humor with particular force will be the manner in which men and women of our day entered the state of matrimony. Every profession, every vocation, every measly trade even, demands some sort of preparation, a preparation lasting from several months to several years. Into the marriage state alone, a state which is for life, a state which involves immediately the life and happiness not of one but of two persons, and potentially of several more, people rush pell-mell, haphazard, without any preparation whatever.

Of course, the answer in your mind, no doubt, is: people have done so for thousands of years and got along. *Yes, got along, but how?* Have you observed the disillusionments, the heartaches, the disappointments? Have you measured the disgust, the indifference, the resentment, the mutual ill-will, nay, the deep hatred, the desire for injury and revenge? Have you

---

\*Dr. Wm. J. Robinson in "*Married Life and Happiness.*" Critic and Guide Co., New York.

estimated the amount of ill-health, the grief, the pain, the daily suffering, the nightly tossing and restlessness? Have you counted the hysterical outbreaks? Have you any idea of the number of neurotic wives and neurasthenic husbands? Have you estimated the disrupted homes, the number of separated and divorced couples? Do you know the number of those who have committed suicide and murder, and the number of those who are even worse than dead, namely, those who are in the insane asylums?

*Yes, got along!*—Yes, got along the way some ignorant mothers get along in the bringing up of their infants. You know the middle-aged woman who was advising her young neighbor about the method of feeding her baby. When the young mother seemed to be skeptical, the older woman said with indignation: “I ought to know how to bring up children. Ain’t I buried nine of them?”

*Yes, got along!*—People get along somehow in a prison and come out alive. But is such a life worth living? And I assert and could readily prove that the lives of many married couples, particularly married women, is not very different from—not much better than—life in prison. And one of the causes—I do not say the sole cause, because this would be untrue—one of the causes of this discontent, unhappiness and tragedy of married life, is *ignorance—lack of proper preparation.*

If girls were educated from puberty, or late adolescence, in the psychology of man and woman, and taught to recognize the specific differentiations of the sexes, the powers, aptitudes, limitations, emotions, and aspirations, all that goes to the direction of conduct—they would err less often in the choice of husbands. The same rule applies to the mental training of young men. As it is, we “leave it to Nature,” and force a couple of strangers to life-long cohabitation. The results are palpable in all classes of society. *Unhappy marriage is said to be the rule rather than the exception. Every divorce case provides evidence that there is something fundamentally amiss with conventional matrimony.*

The time will come, and it is not far distant, when every man and every woman contemplating marriage will take a preparatory course. Whether such a course will be given in high school or college or by the family physician or by specialists in the subject, remains to be seen. Who imparts the knowledge is not so important. The important thing is that it be imparted and

imparted properly. A foreshadowing of the coming preparatory matrimonial course is seen even now in many young men, with whom there is nothing the matter, but who come to the physician to find out if it is all right for them to get married, and to get personal advice on the hygiene of marriage. And what I tell the patient, male or female, in the privacy of the office, I will try to tell you here, as far as it can be told in public print.

#### ADVICE TO WIVES AND PROSPECTIVE WIVES

Woman has been so thoroughly "domesticated" by man that she feels too readily that after marriage she is all his. And by her very docility to his perpetual demands, she destroys for him the elation, the palpitating thrills and surprises, of the chase.

In the rather trivial terms of our sordid modern life, it works out in many marriages somewhat as follows: The married pair share the same bed-room often even the same bed and so it comes about that the two are together not only at the times of delight and interest in each other, but during most of the unlovely and ridiculous proceedings of the toilet. Now, it may enchant a man once—perhaps even twice—or at long intervals—to watch his goddess screw her hair up into a tight and unbecoming knot and soap her ears. But it is inherently too unlovely a proceeding to retain indefinite enchantment. To see her floating in the deep clear water of her bath—that may enchant forever, for it is so lovely, but the unbeautiful trivialities essential to the cleaning processes of a bath, tend only to dim the picture and, if repeated, to dull the interest and attention that should be bestowed on the body of the loved one. Hence, ultimately, everyday association in the commonplace daily necessities, tends to reduce the keen pleasure each takes in the sight of the other. And hence, inevitably and tragically though stealthily and unperceived, to reduce the keenness of stimulation the pair exert on each other. Beale\* says: The fundamental fallacy so pathetically believed in by a multitude of wives is that, having "*got*" her husband, all the apparatus which proved so successful in that quest may be safely and conveniently put aside.

Why she should imagine that the charm and freshness which were such important assets before marriage are thereafter superfluous and dispensable luxuries, passes comprehension; they are,

---

\*By Dr. C. Courtney Beale in "*Wise Wedlock*."



if anything, *more* important, *more* indispensable, if only her indolence would allow her to realize the fact. Just because marriage inevitably contains a good deal of prose, it also requires a double infusion of poetry. Almost any girl can win a man, given determination and opportunity; but to keep him when won is an undertaking which taxes all a woman's wit, resource and unsleeping vigilance.

This is the real problem of a woman's married life; but problems cannot be solved by those who are not even aware of their existence. Woman is sufficiently handicapped by nature, in that her sex-attractiveness leaves her at an age when a healthy man is by no means past the ardours of sex; to anticipate the process of disintegration, to grow *passée* before her time by neglecting to make the best of herself in looks and attire while she is still able to charm, is nothing short of folly.

For it is simply not true that a man—just because he is married—“*does not notice these things*” in a woman just because she is his wife. Why should he have suddenly developed this blindness and insensitiveness? The plain truth is that he is just as fond as ever of the qualities he admired in his wife when he went courting her; and when the dainty girl of a few summers ago deteriorates into an untidy woman who does not care how she looks when it is “*only he*” who will see her, and who goes about at home in faded blouses doubtfully fastened down the back, in draggled skirts and down-at-heel slippers, he is likely to develop “*home-sickness*”—of the wrong sort.

Let a wife firmly repel the temptation to “*let herself go*” as regards either looks or attire or mental alertness, whether for the sake of comfort, from love of ease, or under the mistaken impression that appearances and the like no longer matter in the case of a married woman. If she has children, let her never forget that, holy as is the passion of motherhood, her happiness lies in her ability to retain the love of her husband, and that man's love is rooted in a physical foundation. *And every day let her repeat to herself the truth that it is the Commonplace which destroys love's garden.* With this axiom firmly grasped, she will keep her garden tended and fragrant and sweet to walk in, hand in hand, in the cool of the evening.

*Courtship After Marriage.\**—When love is real and mutual—and not the spurious travestied substitute that has no sincere

---

\*By Walter Gallichan in “The Psychology of Marriage.”

emotion behind it—love-play, courtship, and the arts of attraction have supreme importance. Wooing should be a continual romance throughout the conjugal life. Ardor is kept burning by those united pairs who recognize that marriage should be a prolonged courtship. No human being has true possession of another by a simple legal or religious ceremony. Unity is only possible for those who make love with a more subtle skill after they are officially united. Neither must demand; both must give gladly.

Wives frequently fail to act as lovers towards their husbands. Probably in a vast number of instances, the fault lies with the husband. But the wife often forgets that love is a fire that needs fanning and replenishing. She may realize this with tears and remorse, when her partner grows supine to her charms, or transfers his admiration to another woman. And it may be too late. Frets and jars lead often to the deplorable state known as "strained relationships." Misunderstandings of a sexual character are wont to arise in many unions. False modesty may restrain a wife from explicit speaking upon a cause of physical or psychic sexual disharmony. The husband may be dull, tactless, but still anxious to cherish.

Strange as it may seem, there is a very common absence of candor between the married. The cold, deadly hand of traditional prejudice lies on the lips of the woman when she should unburden her soul. She is mute and helpless. Bewilderment and despondency assail her in sleepless hours. The man by her side seems like a stranger. He may be a model of rectitude, a good citizen, and a hardworking provider for the family. But the heart of the woman cries out almost hourly for more than this. She craves love, and full understanding; she yearns for the only possible satisfaction of her psychic being, true conjugal happiness, and oneness with the beloved.

If wedlock is not a nest, it can only be likened to a cage. The cage may be superbly gilded in the material sense, and yet it is a prison-house, or a mortuary of expired hopes. The indifferent or apathetic wife may transform the bower into a dungeon. Coldness, pruderies, or affectations will chill the fire in the husband. The night fails to "*hallow the day*" for the unmated, and the morning brings secret thoughts of rupture and separation. These rifts widen. The woman becomes colder; the man may be unable to assign any cause for the waning of her love.

*Wife's Behavior Toward Marital Relations.\**—I am now coming to a delicate subject. But, delicate though it is, it must be dealt with unflinchingly, because it is probably responsible for more male infidelity than all other causes combined. I speak of the relation of the wife to her marital duties. Too many women regard the marital relation as a nuisance, as an ordeal, as something disagreeable. The reasons for this behavior on the part of many wives are manifold; this is not the place to consider them in detail. I will allude to them briefly. One great cause is congenital frigidity. Such women are not to blame; *they are to be pitied*. But even they can behave so as not to repel their husbands.

As you know, about twenty-five per cent of all women are sexually frigid. If you are unmarried, well and good. But if you are married and happen to belong to the frigid type, then *don't inform your husband of the fact*. It may lead to great and permanent trouble. Some husbands don't care. Some are even glad if their wives are frigid. But, some men feel extremely bad and displeased when they find it out.

If you belong to the independent kind, if you scorn simulation and deceit, if, as the price of being perfectly truthful, you are willing if necessary to part with your husband or give him a divorce, well and good. You are a free human being, and nobody has a right to tell you what to do with your body. But if you care for your husband, if you care for your home and perhaps children, and do not want any disruption, then the only thing for you to do is *not* to apprise your husband of your frigid condition. An innocent deception which hurts nobody, but, on the contrary, benefits all concerned, is perfectly permissible.

Another great cause, is the vicious, prudish bringing up. Such women need a good "talking to," and if they are only not natural born fools, one good explanation often fixes matters. On a par with this general prudishness is the infamous idea promulgated by some, that the marital relation is for the purpose of propagation only. That only when a child is wanted is the relation permissible. Of course if the wife has such ideas the husband deserves little sympathy. A man should know before marriage what ideas the woman entertains whom he is going to make his wife and the mother of his children. But unfortunately, this

---

\*By Dr. Wm. J. Robinson in "*Woman: Her Sex and Love Life*." The Critic and Guide Co., New York.



is seldom touched upon by the engaged couple, and after they are married they often find themselves at opposite poles. Here also a good heart-to-heart talk will do a world of good.

In many cases the cause of refusal is fear of pregnancy. In this case the wife is right. But the remedy is simple; give her full instruction in the use of contraceptive measures. Other causes are: excessive masturbation, vaginismus, local malformation, inflammation, etc. But whatever the causes of the wife's "bad behavior" may be, they are all amenable to treatment. Some need medical treatment, some psychic treatment, and some nothing but just a common-sense, heart-to-heart talk.

And I would emphasize: Do not repel your husbands—at least do not repel them too often. But of course you should not go to the other extreme either. You should not make too frequent demands upon your husband. A wife who is unreasonable in this respect is sowing the seeds of discord and unhappiness. She is sacrificing the future to the present. The husband is apt to become afflicted with satiety or impotence—and the wife may have to lead a life of continence for much longer than she would have had to if she had been moderate. *In no department of life is moderation so important as in sex life. Non-use, insufficient use and excessive use are all bad.*

*Cleanliness.*—The wife, whether the bride of a day or the wife of thirty years, should be *clean*. Literally from the crown of her head to her very toes, she should be clean, so clean as to be able to stand inspection, even in complete nudity. Every fold in her body should be clean.

*Daintiness.*—Cleanliness and daintiness are not exactly synonymous and one may go without the other. Not every woman can be dainty, but many of them can with a little care. The hands should be well manicured and the feet should be properly pedicured. Corns and bunions should be taboo. They can be removed without much difficulty and expense, and they *should* be, because they do not contribute to man's esthetic enjoyment. A chiropodist now and then may be a necessity, but a manicure is a useless expense. With a small manicure set every woman should be able to keep her own finger nails in an immaculate condition.

*Dainty Underwear.*—This may be considered too delicate or too trifling a subject to discuss in an important sex book. But

nothing is too delicate or too trifling that concerns human happiness, and nice underwear or dainty lingerie plays a very important role in marital life. And every married woman should have as fine and as dainty underwear as she can possibly afford. A fine or elaborate nightgown may be more important than an expensive skirt or hat. Unfortunately too many women ignore this fact. Externally they will be well dressed, while their petticoats and underwear will be of the commonest quality and of questionable freshness and immaculateness. And if anything in a woman's toilet should be immaculately fresh and clean it is, I emphasize, her underwear. Silk and lace and delicate batiste should be preferred, if they can be afforded, and attention should be paid to the color. As a rule, a delicate pink is the color that most men prefer. I therefore repeat, whether you are newly married or have been married a quarter of a century, be sure that your underwear is the very best that your means will allow you, and that it is always sweet, fresh and dainty. It will help you to retain the affections of your husband. I know that some will scoff at this statement. They say that an affection that may be influenced by the kind and condition of underwear is not worth having or retaining. But what do they know of the numerous subtle influences which gradually either strengthen or undermine our affections? Follow this advice and you will be grateful.

*Do Not Offend Against Esthetics.*—Some women think that because they are married to their husbands they owe the latter no esthetic consideration. Things that they would be horrified to let a stranger see they do before their husband's eyes without hesitation. Some husbands may not mind it; but some men are very sensitive—men on the whole are more esthetic than women—and an indifference towards the wife may have its origin in some vulgar or unesthetic procedure on the wife's part. Beale's\* admonition to any young married couple is: "*If you want to kill romance, disregard modesty.*" Romance cannot live in an atmosphere of gross physical familiarity, nor long survive the performance by husbands and wives of all kinds of private acts in each other's presence. Yet it is a fact that there are plenty of women from whom, once they are married, all the modesty so rigidly enforced during girlhood drops for good and all so far as their husbands are concerned—wives who discard the reticences one would have thought instinctive, and both in word and act

---

\*Dr. C. Courtney Beale in "*Wise Wedlock.*"

throw all reserve to the winds. You may think that these are all small things, but life is made up of little things, and many a married life went smash on account of disregarding the little things.

*Obesity and a High Stomach.*—Avoid if you possibly can a high stomach, or a big stomach, or what we call in technical language a pendulous abdomen. Nothing is more fatal to woman's beauty—and to man's love—than a big stomach, and particularly a hangdown stomach. It at once takes away her youthfulness and makes her matronly—and matronliness is fatal to romance. It is not so much general stoutness that is objected to—some men, as is well known, prefer plump, stout women. And there are some savage tribes in which the preference is given to obese women with enormous abdomens, but this is not the case with the Caucasian race—not in civilized countries, at any rate, and surely not in the United States. And against this physical calamity woman must fight with all her will power and all the energy at her disposal. And with the exception of a small percentage of cases where obesity is hereditary, the careful woman can always guard herself against becoming too fat. First, reduce your carbohydrates, use massage and hydrotherapy, walk for hours at a time, but reduce your big abdomen—or, still better, don't let it get big. Prevention here, as elsewhere, is much better than cure.

*Bad Odor from the Mouth.*—I know of no other physical ailment which is so dangerous, so fatal to the permanency of the love relation as is a strong, offensive odor from the mouth. As a noxious gas blights a delicate plant, so will a strong bad odor blight the delicate plant of love. Yes, a strong malodorous whiff will cool the most ardent passion. The public would be astounded if it knew how many cases of separation and divorce are due to nothing else but a bad odor from the mouth. Therefore, if you happen to suffer from this unfortunate ailment, lose no time in applying to a competent physician, and do not tire of treating yourself, no matter how irksome and time-consuming the treatment may be, until you are completely cured.

*Odors from Other Parts of Body.*—Odors from other parts of the body should be conspicuous by their absence. Normally no artificial aids are needed. Frequent bathing and general cleanliness are alone sufficient. The natural feminine odor—*odor feminae*—is pleasant, attractive and needs no disguise. But where an unpleasant odor from the genitals, feet or armpits is present the



proper treatment should be applied, and in such cases the use of a delicate perfume, sachet or scented talcum powder, is quite permissible. Not only permissible but advisable.

*Leucorrhea*.—Many women or girls suffer from a slight discharge from the birth canal. If it is slight, odorless, and causes no irritation, it may be disregarded, except for an occasional douche, once or twice a week, for the purpose of cleanliness. But it is incredible, for how many years some women will go along with a profuse, ill-smelling irritating discharge, without doing anything for it. *And that is bad.*

Only recently I saw in my office a woman who anxiously begged for advice and treatment. She had been married five years. She has always had leucorrhea, from her fifteenth year so far as she remembers. Otherwise she did not suffer. For the first three years or so—her married life had been happy. Then in an unfortunate moment she told her husband about her profuse leucorrhea and instantly she noticed a change in him. She took some patent medicines and went to one doctor, but without any results. Now, unless she could be cured, she feared her husband would demand a separation or a divorce. I have had several such cases—and great trouble may result. *If you have leucorrhea treat it.* (See page 613.) And remember you need not initiate your husband in all your unesthetic ailments.

*Loyalty*.—Loyalty on the part of the wife is almost as important as fidelity. And it is in the highest degree disloyal for a wife to talk to her female or male friends about her husband's peculiarities, foibles or weaknesses. The husband's—as well, of course, as the wife's—peculiarities should be what we call a professional secret. Just as a physician is forbidden to talk to outsiders about his patient's troubles, so should a wife not talk about her husband, nor a husband about his wife.

A woman novelist of distinction, Mrs. Belloc-Lowndes, propounds the somewhat startling theory that women in matters of the flesh are less addicted to delicacy than men; certainly it is true that some women will discuss—will gossip over—the intimate details of their marital life with a freedom never practiced by men. We would say most earnestly that there is no greater mistake than this vulgarization of love either in speech or act, this tearing away of the last veil which shrouds, the ultimate privacies, the ultimate secrets.

*The Hygiene of Marriage*.\*—The early weeks of marriage, especially those of the honeymoon, are those in which women especially need guidance. In them the change from the girl to the wife occurs, a change of so radical a nature that there is no time in women's lives which requires more delicate handling. Yet there is in the modern honeymoon a foolish and reprehensible disregard of physiology which is quite inexcusable.

Every doctor who is consulted in these matters knows many a case in which the young wife and also the husband have suffered very considerably upon the honeymoon. Not infrequently, injuries leading to long illnesses may date from this period, and, I think, as frequently, moral injuries are inflicted upon the wife, from which she suffers very often in secret for a considerable time. Gallichan states: "There is no question that the honeymoon is often an ordeal, and not infrequently a tragedy for the inexperienced woman. The experiences of this episode may imply a complete reversal of all the maidenly views upon love and marriage. Serious mental shock, leading to hysteria and other neurotic disturbance, is by no means uncommon. So subtle and delicate are the emotions aroused that one injudicious phrase may sink into the mind, and set up an inner conflict or repugnance lasting for the whole of married life. There are blunders and indiscretions that some women can never really forget. A woman of fine mental fiber and sensitive feeling, a modern type of temperament conspicuous in the refined classes, may possess the deepest capacity for love and for reciprocal fervor, and yet live always secretly estranged in soul from the husband who has acted thoughtlessly, selfishly, or ignorantly in the early days of conjugal union."

A husband may, out of ignorance or lack of consideration, cause his wife considerable pain. Indeed, if he fail to treat her with delicacy and understanding, he may bring about a condition that causes her so much pain as to make the consummation impossible, and also to produce in her a highly nervous and hysterical condition, one in which a dread and dislike of her husband may form a prominent feature. One often has to express a grave regret to men, who, owing to the temptations of life, have acquired what they call experience from a class of women very different in their sensitiveness to the refined women whom they

---

\*By Dr. G. T. Wrench in "*The Healthy Marriage*."

have married. Such men fail to make a proper distinction, and show an attitude to their brides which is unintentionally brutal. Here, again, one has the groundwork of prolonged nervousness and of definite personal dislike, which spoils the desirable married happiness.

#### ADVICE TO HUSBANDS AND PROSPECTIVE HUSBANDS\*

Marriage is the most important step in a man's life. Marriage often makes a man's life, and just as often mars it. To discuss briefly all the qualifications necessary for a happy marriage would be worthless, and for two reasons: First, all rules given for happy marriages are apt to be thrown to the winds when a man falls in love. He will then act contrary to his principles and his firmly made decisions and resolutions. Second, we have not yet reached such a stage of knowledge, where we can say dogmatically just what conditions are necessary to a happy marriage, and what characteristics will result in the unhappy marriages. Only too often have people been disappointed—pleasantly or unpleasantly. And it is well known that some of the sincerest love-marriages, supremely happy at first, turn out later on very unhappily.

Nevertheless, we do know something about some of the factors essential to a happy marriage, and no wise man will neglect to inform himself about them. The first factor is good sexual health and power. Not merely freedom from venereal disease, but good sexual potency. For, no matter how favorable all other conditions may be, no matter how sweet-tempered both partners, how excellent their financial condition and how good their general health, if the husband is suffering from sexual impotence, the marriage *cannot* be a happy one (with one exception—when the wife herself is also impotent, or absolutely frigid). Most likely it will be a tragedy. In fact, in my opinion, more unhappy marriages, more tragedies, more divorces result from the husband's sexual impotence than from venereal disease. You can, if you are forewarned, protect your wife from venereal infection; you can do nothing for her if you are suffering from permanent incurable impotence. As it is a cheering sign of progress that just as men who once suffered from some venereal infection, and who contemplate marriage, are now coming to the physician to find out if they are free from any trace of disease, so men are

---

\*Dr. Wm. J. Robinson in "*Sex Knowledge for Men.*" The Critic and Guide Company, New York.



coming in to find out if they are right sexually. And then they also want to get all the information they can about the effects of heredity, about marital hygiene, about the bridal night, about the proper frequency of sex relations, about the use of one or two beds, about means of regulating conception, and about a thousand and one other things. And the fact that this custom is getting in vogue with the intelligent laity is considered a happy augury for the future. There can be no wiser procedure, no better paying investment than a pre-marriage examination at the hands of a competent physician. It may save the future husband and wife much ill-health and much misery. *And books alone will not take the place of personal advice and instruction. The advice and instruction must be individual.* For what is suitable for one person may be quite unsuitable for another. And besides, there are certain things that cannot be mentioned or explained in a book. Assuming that a writer possessed the ability and necessary clearness to explain "*everything*" in all its details, so that even the reader of ordinary intelligence would not misunderstand or misinterpret. But if we cannot discuss everything, let us discuss what we can.

*Venereal Disease and Matrimony.*\*—The first thing that a man who intends to become married should be sure of is that he is free from transmissible venereal disease. *This goes without saying.* It is a requirement that is already obligatory in many States and which no doubt will soon become obligatory in all States. And it is pleasant to be able to say that even in many States where this requirement does not exist, men voluntarily try to find out whether or not they are free from venereal disease.

Should every candidate for marriage subject himself to the Wassermann test? Where a man is absolutely sure that he never had any symptom, sign or suspicion of syphilis and he feels and looks to be in perfect health, it is not necessary. But if there is a history of the slightest pimple on the genital organs, or of sore throat, of a rash on the body, of temporary falling out of the hair, or of headaches, pains in the bones, etc., it is best to take a Wassermann. The taking of the Wassermann test is a trifling thing; it is no more painful than the prick of a needle and takes but half a minute. And the feeling of security is worth the little trouble and trifling expense. While if the Wassermann is found to be

---

\*By Dr. Wm. J. Robinson in "*Married Life and Happiness.*"

positive, the patient should certainly know it. A Wassermann should also be taken in cases of all men whose fathers or mothers suffered from peculiar symptoms, died from apoplexy, were queer, or were confined, even if temporarily, in an insane asylum. We know that locomotor ataxia and softening of the brain are the result almost exclusively in syphilis, *and a person may have shown no symptoms and carry in himself the taint of hereditary syphilis.* I have known some very, very sad cases of young men who lived an exemplary life, who had no sex relations whatever, who were brought up to lead a strictly chaste life, and who were nevertheless stricken down by a mysterious malady which, on examination, proved to be syphilis which they had inherited from their fathers. So on the whole, it is best to make a thorough examination, for it is always best to be on the safe side.

As to people who knowing that they have or had had venereal disease and who neglect to have themselves examined, get married and infect their wives, language fails to characterize such people properly. Infecting the wife with venereal disease should not only be considered sufficient cause for the annulment of the marriage with an allowance of substantial alimony, but should be considered a criminal offense. *In fact, the infection of another person with venereal disease should be considered a criminal offense and the guilty party should, besides, be liable to heavy damages. Infecting a person with venereal disease, thus making him or her an invalid, perhaps, for life, is a greater offense than assault and battery.*

*The Bridal Night.*—The bridal night is the most important turning point in a woman's entire life. Upon the man's behavior during that night depends to a great extent his wife's attitude toward him. Michels says\*: "We have the crass ignorance in which before marriage many girls are left regarding everything which concerns the sexual life—an ignorance which is responsible for an irresistible feeling of anxiety, and is not inconsistent with a dread expectation of terrible things about to happen. This is all the more comprehensible when we remember that the girl, while deliberately kept in ignorance, has nevertheless been able to glean from conversations, from books, and from overheard jests, a certain number of sexual facts; apt to be offensively conceived, precisely because they are torn from their natural context and are most remote from the normal working of the healthy

---

\*Robert Michels in "Sexual Ethics."



girl's imagination. There is further to be considered the dread of the physical pain to be experienced from the rupture of the hymen. But the chief source of trouble is the suddenness of the sexual transition. Where the self-surrender is gradual, no anxiety arises. Anxiety and its sister-feeling of shame disappear in the ecstasy of love, take to flight before the awakening of desire."

"The brutalities of the nuptial night often prove the grave of love. The sudden intimacy with a man who, materially at any rate and often psychologically as well, has been known only from a distance, strikes terror into many women. The bridal night and those that immediately follow it not infrequently conceal the germs of death. The marriage bed with its troubles and sufferings is often the starting-point of long illness, leading the man to a premature grave, and the woman to the lunatic asylum."

The conduct of a man in the highly critical first weeks of married cohabitation usually decides to a great extent the chances of happiness for himself and his bride throughout the rest of their lives. Very many unfortunate unions are predetermined by mishaps, misunderstandings, and involuntary errors occurring in the honeymoon stage of matrimony.

*Frequency.*—The question of due regulation of conjugal intercourse in the interest of the husband and wife and their offspring is one that gives rise to considerable doubt and perplexity in the minds of married persons who wish to live healthily and usefully. Excessive indulgence is a source of nervous and functional disorder in man, and a cause of impotence, and sometimes of sterility. We have seen that the spermatic fluid has a two-fold use—in the upkeep of bodily vigor and for the racial continuance. Any heavy loss of this force is a kind of emasculation. A deficiency of the secretion brought about by excesses may occasion general weakening of the body, and enfeeblement of the intellectual powers.

Vecki attributes neurasthenic impotence to excessive intercourse or to masturbation. "*The consequence of excess in venery is always and without exception impotence.*" The physical symptoms of immoderation in men are loss of weight, flabbiness of tissue, pains at the back of the neck, and lassitude. There are often depression of mind, nervous symptoms, anxiety, and some impairment of mental energy. Men are more liable than women to suffer from immoderate sexual intercourse.



Modern medical authorities agree concerning the difficulty of laying down definite rules. Some men have a congenital virility, others are born with only slight capacity. In no sphere do men differ so much from one another as they do in the sexual sphere, and what is normal for one person is too little or excessive for another. Some people of fifty or sixty are much stronger sexually than others of thirty-five; and the person's occupation also makes a considerable difference. People engrossed in intellectual work cannot and should not perform the act as frequently as people devoted to physical labor only, and people who will be moderate in their younger years, will preserve their sexual power to a much later age than those who are excessive.

*Continence in Marriage.\**—There are especial times, of course, when continence in marriage must be observed. At the time of menstruation there has always been amongst all peoples the strictest continence observed, and amongst many peoples there has been and is an additional complete separation of husband and wife for a few days afterwards. In the law of Moses the breaking of this law of continence was punished with death. These laws and customs have a sound physiological basis. Any infringement of them is apt to lead to sudden cessation of the menses with cramp of the womb and hysterical symptoms, or on other occasions to loss of blood and vaginal discharge. The husband also may contract a troublesome urethral catarrh.

Similarly during pregnancy amongst some peoples of the world there is the same greater privacy on the part of the wives, a privacy as strictly regarded by the husbands as the proprieties of society are regarded amongst civilized people. But this separation of husbands and wives during pregnancy is by no means widely spread. Amongst civilized people it is not regarded at all, nor is it to be commended. Continence should be observed for the month preceding the birth of the child. After the birth of the child, the Bible lays down a continence of forty days or some six weeks. Amongst some peoples, continence is observed until the child is weaned. Though continence is not necessary during pregnancy, there are cases of pregnancy when it is necessary. Such cases are those threatened by miscarriage, for intercourse may bring on the miscarriage. Continence should be observed for at least a month after all signs of threatened mis-

---

\*By Dr. G. T. Wrench in "*The Healthy Marriage*."

carriage, such as loss of blood, has ceased, and then should be very moderate. If miscarriage occurs, continence should be observed for six weeks, as after a childbirth. Continence should also be observed if there is any hemorrhage with intercourse, unless it occur in the beginning of marriage, when it is frequent. With this exception, however, continence should be observed and a doctor's advice sought.

As has been said, during the process of suckling the child until weaning, continence is observed amongst some people. At this time, amongst civilized people, there is not as a rule continence, but moderation should be enjoined more particularly than at other periods. The process of suckling a child is one that evidently entails some physical sacrifice upon the part of the mother, for nature has provided the general rule, a rule not free from exceptions, that the suckling mother does not become pregnant. The strain of suckling is evidently sufficient, and nature does not permit that of pregnancy to be added to it.

*Single or Separate Beds.*—The question whether the husband and wife should sleep in the same or separate beds is put to the physician much more frequently now than it used to be in former years. As a general thing, my advice is: separate beds; both for reasons of general hygiene and for the sake of sexual health, separate beds are preferable. Beale\* strongly insists on the desirability of separate beds, not touching each other, but divided by a curtain or screen. There will thus be opportunity for the tenderness, the dear confidences, the happy unconstraint, with which each day should close; but there will be also that amount of privacy which is each individual's birthright, and which it is not well nor wise to surrender. And most certainly each should carry out the operations of the toilet unseen by the other, simply because these proceedings are inevitably deficient in dignity, beauty and aesthetic character. *Romance, once tarnished by the undignified or grotesque, like the iridescent sheen on a butterfly's wing once defaced, is gone forever.*

---

\*Dr. C. Courtney Beale in "*Wise Wedlock.*"

## CHAPTER XXVIII

### IF EVERY MAN WERE STRAIGHT\*

WHEN a man does not know himself, and is not straight and true in his sex-life, calamitous conditions may occur to three distinct classes of people—to himself, to the woman who becomes his wife and to his children, *if indeed he can father children*. The calamity may come to one or two or all three. Not many thinking young men would voluntarily bring upon themselves or the ones they love any physical or mental blight—surely not if they know what these blighting results may be. Shall we then face the facts and see how many, many devastations might be avoided if only men were straight and true. The subject is far wider than the venereal disease problems, and I want you to think not only of the diseases which despoil the body but of the infinitely greater dangers to the mind and to the soul. It follows, then, that if every man were straight certain conditions would never occur.

If every man were straight, there would be no such thing as masturbation or self-abuse. Boys would be taught very early in life that this habit is an evil and that Nature will take care of his sex-organs without any aid from himself. *He would know that wet-dreams or night losses are the natural occurrence in healthy, vigorous youths and young men and in older men who are continent*. There would be no question whatever about keeping free from this horrible habit and no boy or young man would think for a moment of indulging in this physical pleasure or teaching anyone else to do so when he knows how sadly it depletes the system of that which is needed to make a man strong, vigorous and alert. As a boy he will learn how to take such care of his body that it will be keen to carry out the orders of a mind filled with that which is best and highest. *A real man can do anything. He can do what he wills*.

If every man were straight, there would be no such thing as prostitution. There would be no loose women if there were

---

\* Taken from a very excellent book by Dr Oswald C. J. Withrow, M.B. (Toronto), M.R.C.S. (England), L.R.C.P. (London), entitled *Talks On Sex Education*, published by F. D. Goodchild Company, Toronto, Canada. (Price \$1.25.)



no loose men. It is computed that the average number of men served by each prostitute daily is ten. If they only knew, men would avoid prostitutes as they would the plague—for indeed they take huge chances of contracting those diseases which are the most serious of all. Think of the chances of infection daily to those who take the way to their houses. Better than all, men would learn to know the opposite sex in the best sense, would respect and protect them, and would do nothing to contribute to any girl's downfall and entrance upon that most horrible and bestial of all lives—*prostitution*. I feel sure that not more than five men out of a hundred understand women at all, and those who boast of having sown wild oats and consorting with harlots know true, pure women least. *The ranks of the prostitutes are recruited largely from girls who have been betrayed by men under the guise of love, and then flung aside as a toy, old and tarnished and of no further use. Some day the world will have the proper label for such rascals. But of those young and ignorant fellows who are first led astray by the allurements of the scarlet woman I want to ask one question. Who is your boss—the girl with the honeyed words or you—yourself? When every man is master of himself there will be no prostitutes.*

If every man were straight, there would be few suicides among young women, and there are a great many today, not so named in the daily press. A young man in the guise of a lover leads a pure girl into illicit relations, and pregnancy occurs. What is to be done? The young man cannot or will not marry her—our modern social conditions being largely responsible—and a tragedy is bound to occur. Either she takes the poison route to the great beyond (how many times it has been my lot to view this kind of passing) or she mutilates her body to get rid of that which would prove a curse to her all her days, or she employs some quack “*doctor*” or ignorant “*nurse*” to “*help her out.*” In a few days blood-poisoning and death—you may call it *murder or suicide*, but that is what is happening only too frequently. If she does not die, the girl passes through a long and serious illness and bears in her body scars which will never be eradicated and in her soul sorrows and suffering which will never be healed. *No MAN will be guilty of such a crime against pure girlhood.*

If every man were straight, there would be no illegitimate children to wander, like Ishmael, up and down the earth with

everybody's hands against them and oftentimes with their hands against the world. And what about the girl-mother with no protection against the cruel slurs and stigmas of society? It is against such that men and women lift up cruel stones and cast them with great vehemence, feeling singularly righteous all the while. *When a man is straight and true he will never perpetrate such a crime against womanhood and childhood.*

If every man were straight, true love would find a place in every man's life. He would respect and honor all women and he would love one woman supremely and would learn to understand her through and through. He would realize what true Love means and how the Body, the Mind, and the Spirit of the woman he means to make his wife are equally important. The physical side of Sex will never fully satisfy any thinking man, and the sooner men are told this with no uncertain sound the better it will be for the human race.

If every man were straight, there would be no such things as venereal diseases, and I want you to see from the foregoing pages just what this statement means. Think of the misery and unhappiness which might be saved—think of the waste of money and human life which might be stopped—*and then think that venereal diseases are absolutely preventable,—if every man were straight.*

If every man were straight, there would be no such thing as gonorrhoeal rheumatism. Any man who becomes infected with the venereal disease called gonorrhoea may be the victim of this serious complication. The joints become swollen and very painful, the man is rendered unfit for any duty, and the condition is practically incurable. It is easy to write "*Rheumatism*" on the man's medical history sheet so that the world may not know the truth, but the doctor knows and the man knows that gonorrhoea following an impure life was the cause.

If every man were straight, most of the chronic diseases of the bladder and generative organs would cease to exist. These troubles do not come from within the body. They are introduced from without, and the germs of gonorrhoea and syphilis are largely responsible. When these germs once infect the generative organs, no one can possibly tell how far the trouble may extend. Think of it—what is spoken of as a "*simple*" gonorrhoea—"*No worse than a bad cold*"—may cause serious disease of the urethra,



the bladder, the prostate gland, the kidneys or the testicles, besides causing joint, blood and heart diseases. Gonorrhoea is a very serious disease and man does not need to acquire it nor to suffer from the many troubles which follow if he will but live straight.

If every man were straight, there would be no such thing as Organic stricture. *This is NEVER due to a strain*; it is almost always due to gonorrhoea. You have seen how a deep burn when healed contracts the skin markedly. This is what happens to the delicate mucous membrane of the urethra after an attack of gonorrhoea. This contraction partly closes or wholly shuts off the urethral opening and a great deal of trouble follows. Instruments and surgical operations are necessary to make life worth living, *but once stricture develops it is really never cured*. You have been told to report for prophylactic treatment, if by any chance you forget your manhood and "fall" for a prostitute. This is what you should do certainly and as early as possible. There's no question about that. But isn't it just possible that the preventive treatment which will keep you from having gonorrhoea or syphilis may cause stricture if the treatment is needed too often. Suppose you placed such medicine frequently on the delicate lining of your eye. Wouldn't you expect to spoil your eye? The mucous membrane of the urethra is just as delicate. *The only way to keep from having stricture is to keep away from prostitutes.*

If every man were straight, there would be no such thing as chronic gonorrhoea, which means gleet and prostatic disease and other conditions. Although gonorrhoea can be cured, it is so difficult to cure that hosts of cases become chronic. Of 270 men suffering from gonorrhea in one hospital at one time, 240 were chronic. This means that the germs of gonorrhea may be present in the passages of the generative organs for months and years and are capable of infecting others long after the acute symptoms have passed away and the disease is supposed to be cured. If every fellow knew how serious gonorrhoea really is, I feel sure that not one of them would take a chance. If the man himself only suffered it would be bad enough, but when he knows what serious results follow in innocent women and children he will surely keep himself straight.

If every man were straight, most of the surgical operations on the female generative organs would not be needed. Men



marry pure, innocent girls, after having had gonorrhoea which they think is cured. *Only the lowest, most contemptible brute would marry, knowing that his venereal disease was still acute.* But if the germs are there at all they may infect the girl-wife of a few days or weeks, and the results are likely to be very serious. Any of the female generative organs may become infected, and when the inflammation spreads deeply a surgical operation is imperative. *This may not save the woman's life, and she dies—in the very heyday of youth—as truly murdered as tho by an assassin's pistol.* If she lives, she is mutilated and deprived of ovaries or uterus, or both. Is there any greater tragedy under the sun? I know of none. Yet men—and women, too, I am sorry to say—think lightly of the young man's wild oats, and mothers either do not know or do not care about the danger that threatens their daughters who marry men who have ever had venereal disease. Husbands have shed bitter tears, wives have had their lives spoiled and hopes killed because of this calamity which has entered their married life so soon after the honeymoon. Whose fault is it? Frankly and honestly it must be laid at the door of the man who has not lived straight. The number of surgical operations performed under the names of "appendicitis" or some such innocent label when the real cause is venereal disease is not written in reports, and physicians dare not tell the truth to their patients. Every true youth yearns for a home and a pure-minded girl as its mistress. It will be easy to make her happy and keep her healthy if the young man will but live straight and keep himself clean for her.

If every man were straight, there would be fewer childless homes. Gonorrhoea causes sterility in both men and women. Many a wife with a strong mother instinct comes to find out what is wrong with her that she cannot have children to brighten and bless the home. *She does not suspect nor can the physician tell her that her husband is to blame because years before an attack of gonorrhoea has so affected his generative organs that he cannot become the father of children.* The future depends largely upon the character of our homes and of the children born during the next generation. Every true girl has the mother instinct strongly implanted. Don't you think, boys, you owe it to the girl who will some day become your wife and who will expect to become the mother of your children to live the straight life now?

If every man were straight, very few children would be born blind. Nearly every case of blindness in the new-born is due to gonorrhea. *Oh! the horror which must pursue a father all his days to know that the blindness of his babe is due directly to his own sin.* The innocent child, in its journey into this world from its mother's body, has its eyes infected by the germs of gonorrhoea which the father has passed to his unsuspecting wife, and ever after has to grope its unseeing way through a world of sunshine and beauty, the darkness made more awful because it could have been prevented if the man had only been straight. When King John ordered Prince Arthur's eyes to be put out with red-hot irons, the boy pleaded with Hubert to spare him, and his words are strong and vivid enough to move anyone to tears. *The unborn children are pleading for common justice as they enter this world.* Spare their eyes, you young men who travel that pathway which is not straight. You can do it if you will.

If every man were straight, there would be only about half the number of abortions and miscarriages. Syphilis is the real cause of half the troubles of this kind, and as you will readily see, this proves serious in two directions: First, it causes a great amount of race suicide; and second, it endangers the health and the life of women. How many women are carried out prematurely to a place in God's Acre because of complications after abortions and miscarriages following venereal diseases will never be known because such facts are not published. *These women are murdered by their husbands.* There's no shadow of a doubt about it, but the death certificate doesn't call it that and the law has no redress.

If every man were straight, there would not be nearly so many babies born dead. Do you realize what that means to a mother who has been dreaming dreams of the future of her child who will be strong and healthy and beautiful and everything else that a good baby can be? To tell a mother that her child is still-born—that is indeed a heavy task—and one cannot say to her that the cause is syphilis and her husband is to blame. *I wonder if the truth would not be best after all?*

If every man were straight, there would be few children born diseased. I have seen the most hideous examples of syphilis in new-born children. They are loathsome in the extreme. Luckily for themselves, 80 per cent of such children die within



a few days or weeks, *and these also are really and truly murdered.* The father's syphilis has been communicated to the mother, an innocent victim of her husband's perfidy, and from her transmitted to the child. Herod's slaughter of the innocents moves us to righteous anger. What shall we say about the slaughter of the innocent children by the fathers of today?

If every man were straight, there would be far fewer mentally-defective children. This would come about in two ways. First, feeble-minded girls would not then be the prey of men, but would be protected from their own weakened wills and strongly developed sex-life. If any man would stop a moment to think he would realize surely what a grave menace to our national life the feeble-minded are proving to be, and he will be straight before any suggestion of consorting with such. Many generations ago a man was criminal enough to have sexual relations with a feeble-minded girl. From that union has proceeded a long line of criminals, prostitutes, mental defectives, paupers, the flotsam and jetsam of society. Does any real man want to be responsible for this sort of thing? Second, syphilis is one of the causes of mentally-defective children, so that any man who has contracted syphilis may become the father of feeble-minded children. *There is no sadder sight in all the world than a child growing up physically with a very low mentality. Every child has a right to be well born.* If every man were straight, children would at least get common justice.

If every man were straight, practically half the amount of insanity in the world would be done away with. Syphilis is the cause of a large amount of insanity, and the worst of it is that the mental condition takes years to develop. Years after the venereal disease has been contracted, and when a man is possibly at the height of his business success, the ravages of syphilis make themselves known in an attack of insanity, and his sorrowing family have to put him away with others of his kind. Wouldn't it be better to keep away from loose women than take a chance like this?

If every man were straight, there would be among men and women absolutely no paresis, sometimes called softening of the brain. This disease is the most terrible of all and is directly traceable to syphilis. It is incurable, and within a very few years after the symptoms of this type of insanity have shown



themselves death carries off the victim. Children of men suffering from this mental trouble, also known as general paralysis of the insane, may be the victim of this disease—heredity plays a great part here. *Isn't it pitiful to see a girl of thirteen or fourteen years of age insane and very close to the death line because her father has so grossly sinned?* It is computed that paresis forms 25 per cent of all cases of insanity, and since it is directly due to syphilis it would cease to exist if every man were straight.

If every man were straight, there would be no such disease as locomotor-ataxia. This does not mean insanity, but it does mean that a man becomes more or less of a cripple, stalking along unsteadily by the aid of two canes, eyes upon the ground, helplessness written large over his every attitude. Many a man has had a brilliant course at college and the university, has entered business or a profession and made a success there, only to be stricken down with this disease of the nervous system. Then he recalls a venereal disease which he contracted during his student days. *The Mills of the Gods grind slowly, but they grind exceedingly small.* This also is true, "*Whatsoever a man soweth that shall he also reap.*" In the laboratory of the human body results are sure.

If every man were straight, diseases of the arteries and blood vessels would be greatly lessened. One of our famous physicians has told us that we are just as old as our arteries, and it means that if we do anything to cause our blood vessels to become hardened and old, we thereby make ourselves old, no matter how many birthdays we may number. There are men at thirty older than other men at seventy. Syphilis is the cause of these changes in the arteries. Day by day, ceaselessly, noiselessly, the poison of syphilis works upon the delicate blood vessels, making them hard and brittle. *The man works along unconscious of the ravages of the disease until one day an artery snaps somewhere in the body, and he is either a dead man or a helpless cripple.* It's rather horrible, isn't it, to think of such a sword hanging over one's head? Such would not happen if every man were straight.

If every man were straight, no man before middle life would have apoplectic or paralytic strokes. Whenever you see a man under middle-age the victim of sudden paralysis coming on without any apparent reason you must think of syphilis as the most

likely cause. Many a man's life is cut short by apoplexy before middle age. Why? Syphilis contracted years before. When such calamities as these can be prevented, why will men expose themselves to contracting venereal disease? I believe it is mainly because they do not know the facts. *Just so soon as people learn to call things by their right names and think of them as they really are without excuse or equivocation, these tragedies will no longer occur.*

If every man were straight, the average life of mankind would be at least one-third higher than it is today. Venereal disease is responsible for the cutting off of so many men and women years before the end of their allotted span that this menace has assumed large proportions. This is true in military life, and has occasioned the following striking statement from Surgeon-General Gorgas, of the United States forces—"If the military sanitariums were given a choice of an approved method that would eliminate all bullet wounds or all venereal disease from the army, we would choose the latter because its results would accomplish more for the efficiency of the army." A similar statement might be made about our civilian population. Syphilis kills at long range, and so one is apt to question such statements as that just written, but facts bear out the truthfulness of every word. You cannot have this too strongly impressed. Often the fleeting pleasure produces dire calamity.

If every man were straight, his earning capacity would be greater and industrial life would be richer. One of our great corporations has given first place to venereal disease and immorality in lessening the value of their employes' work both to themselves and to the company. The waste of time and money naturally cannot be computed, but it certainly is very great. It is not altogether a matter of dollars and cents, but even from this viewpoint, it is worthy of serious consideration. In the army more men are rendered inefficient through venereal diseases than from any other cause. In civilian pursuits this is equally true.

If every man were straight, it would not be so difficult for women to be pure and true. Girls naturally have high ideals and desire to live right. Men are the aggressors and are responsible for the downfall of many a girl, trading upon her love of dress and admiration, which, within limits, is the inalienable right of every member of her sex. When a woman has fallen to the

ranks of the prostitutes her knowledge of the frailties of men gives her an influence over them to which young men, and older men, too, are foolish enough to submit. *If every man were straight, painted women would pass away forever.*

If every man were straight, untold misery and suffering would be no more. Men and women desire happiness above everything else, but how can true happiness reign in a home shadowed by many of the calamities about which we have already spoken? Here again it is exceedingly difficult to find the sum of all the misery and suffering caused by the perversion of the sex instinct, but any physician knows that almost daily he is brought face to face with its problems. A true man will think twice before he will add even a little to the world's misery,



## CHAPTER XXIX

### THE DOUBLE STANDARD\*

It is reasonable to expect from men the same moral standard as from women? It is, although in so affirming our belief, we recognize the difficulties lying in the way of the realization of such a code of conduct.

It will be hard for men to subscribe readily to this creed on account of their heritage; they will have a tremendous amount of leeway to make up; the power of suggestion has played so large a part heretofore in such matters; custom and the training of the public schools have been contrary to the ideal of the Single Standard, while the churches even have heretofore been negligent. But the increasing number of men now leading clean lives constitutes our chief hope for the future.

There is no doubt that the Double Standard is doomed. Women, when they really know the truth, will not tolerate it for a moment. Men, when they really know the truth, will be fair enough and square enough to cast it forth forever from their speech and thought. For the spirit of chivalry is not dead, and men who are brave and courageous in battle ought to be gladly ready to help build up a grand new civilization in which the Single Standard will prevail.

*FALLEN MEN!* How strange the phrase looks when we see it in print! How strange it sounds when we speak the words! Have you ever seen or heard of it?

*FALLEN WOMEN!* Spoken about, written about constantly—they are looked upon as the very dregs of society—as outcasts following a manner of life which is recognized as hideous and awful in the extreme. They are dragged into our courts, they are fined, they are driven from town to town and from city to city. Every hand is raised against them. *But if there are fallen women there must be fallen men.*

Only in the realm of morals do we tolerate the Double Standard. Everywhere else, in every other realm, there is a Single Standard of excellence. The commodity, the person, the product

---

\* By Dr. Oswald C. J. Withrow.

does or does not reach that standard, and thereby is judged and marked. "Just as good" does not satisfy. We want and we must have the best. If we are forced to accept less than the best we are ever conscious that our possession is below the standard of excellence, and we suffer in our pride before our friends.

For centuries there has been one law for the man and another for the woman. Men have insisted upon it; women have acquiesced in it.

There has become embedded in our social fabric the idea that men may do with impunity what women dare not do without calumny; that young men ought to see life and sow certain "wild oats" in order to be "men" and really live, whereas young women who are to be their future wives must not step from a straight and narrow pathway or they forfeit all right to be chosen as prospective mothers and mistresses of wealthy and refined homes.

And women draw their skirts aside from the girl who has made a false step, while welcoming to their circle the man who has consorted with harlots or betrayed innocent and trusting girlhood. This is the Double Standard—as illogical as it is cruel, and as selfish as it is destructive.

What, then, shall we do? Shall we teach that the law for men is right and good, and therefore women should be encouraged to sow "wild oats" and know the world as young men have been taught to know it? Shall we smile at the lewdness of women as we now wink at the licentiousness of men? Is this what we mean by creating a Single Standard, destroying forever the Double Standard? *By no means.*

The standard we shall set up for manhood is the one now raised for womanhood, and we believe—yes! we know positively—that men can and must adopt this single standard, and women must expect men to live true to it before we shall begin to eradicate the horrible evils which come from the hideous perversions of the sex instinct.

How was it that the Double Standard was set up? It may have originated, and likely did, in those dim and distant ages when woman was man's slave and chattel. It has been kept before the people up to the present hour because of the ignorance of the great majority of the human race about actual sex conditions among men, and women and because of the supreme selfishness of men.

Woman is no longer the slave of man. A new day has dawned for her, and in practically every sphere of service. Of recent years she has emancipated herself from the political thralldom of centuries. Yet she seems willing to live under the Double Standard.

When women really come to realize that thousands of the tragedies in their lives and in the lives of their children are due to venereal diseases, contracted by them from their husbands because of the Double Standard, they will surely seek emancipation in this, as they have sought successfully in other realms. The day is coming when women will insist that their future husbands shall be clean and pure, free from the taints of a lascivious life.

Let us be very frank. *The Double Standard is here in large measure because of the ignorance of the sex life of men and women.*

Men have said, and are saying—while women acquiesce in the statement—that young men are more passionate than young women, and are expected to have sexual intercourse before marriage. Men have taught, and women have bowed to the teaching, that it is necessary to the health of young men that they should practice such indulgences. All these statements and teachings are wrong, and it is high time both young men and young women knew the truth.

The truth is that young men and young women are not so very different as far as passion is concerned. The only difference is that boys are awakened somewhat earlier than girls.

At the time when the girl is entering upon her periods of menstruation, when from her body is discharged certain materials due to the periodical awakening of her sex life, the boy is experiencing certain changes in his sex organs which cause them to be very sensitive, and it is just at this time that all sorts of habits are learned from ignorant companions and all kinds of erroneous teachings are given him whereby he stumbles and falls. His sex organs become a matter of joke and jest, and in many instances women are looked upon as legitimate prey.

Woman is more sexual than man; man is more sensual than woman. Here you have the whole matter in a word. This is where the supreme selfishness of man comes in.

Now knowing what woman really is, ignorant of her passions and temptations, and believing that he alone has a strong sex



nature which must be gratified, he falls into the grievous sin of prostituting himself with some woman who is willing to sell her body for certain silver or gold.

Or, worst of all, he deliberately leads some beautiful girl to so love him and trust in his promises that she gives her all to him. Then he gives vent to his passions, leaving to her a wrecked body and a ruined soul. Heretofore the man has gone forth from such a human tragedy to walk again in the circles of society while the girl has been branded with a stigma as bad as the curse of Cain.

The Double Standard has largely been responsible for the continuance of prostitution. When young men are taught that it is the necessary and the manly thing to consort from time to time with these women whose favors are to be bought in the market just as any goods or commodities may be purchased, naturally prostitution as an institution flourishes. And professional prostitutes know this attitude of mind only too well, adding to their artificial allurements the argument that men need to go with them to preserve their health and vigor.

Besides, mothers and daughters play into the hands of the prostitutes when they accept this teaching about young men. They refuse to take the youth's escapades seriously, and toss any suggestions of wrong-doing lightly aside. "He's a young fellow, and must have his fling," they say. "He'll settle down when he's married." *How untrue and how pitiable it all is.*

Many an innocent and charming young wife suffers that which is far worse than death because her husband came to her impure and unclean. *Too late the young wife learns that the Double Standard in morals is untrue and unsafe.* After she has been mutilated by surgical operations, and oftentimes rendered incapable of bearing children, or has to carry in her body the marking of syphilis, she turns away from her husband with horror and loathing if she learns the truth, or she blames God for all her unhappiness and sorrow and misery, if there is none to tell her what it all means.

During the World War a brilliant and accomplished girl married a soldier just before he sailed for service abroad. She knew he had lived a rather fast life. Her mother knew it, too. But the girl's love for him was very great. When baby came the father was across the seas. As the months went by the young

wife noticed something strange about her child, and when he was two years old she brought him for examination and advice.

The baby was a helpless, hopeless idiot, and the young mother was suffering from that hideous, loathsome and devastating disease, syphilis. The mother is undergoing treatment, and may be cured. The baby is a helpless, hopeless idiot until death shall mercifully remove it from being a burden to the mother and to society. The boy goes out in the world of affairs, where he meets the men of the world, keen business and professional men, who tell him that a young fellow isn't worth much until he has consorted with women; that girls are legitimate prey; that venereal disease is not very serious after all; that lots of fellows have a "dose," which is no worse than a bad cold; that it is necessary for health's sake to go with women. The boy shrinks at first from contact with this slime and filth of the new world into which he has entered. But one day this false teaching leads him to the house of the false enchantress, and he is a fallen man with fallen women.

Then a strange thing happens. He finds that in these days it is not easy from their dress and artificial adornments to tell many an innocent, pure girl from a prostitute. His blood, hot with the sex passion thus rudely disturbed, runs rampant in his veins. He teaches one of the girls of his own circle to love him. He whispers in her ear his eager longings. He is charming, irresistible.

She cannot bear to see the hungry, haunting expression in her boy's eyes. He will marry her soon, anyway. So she consents, and so she becomes pregnant and diseased. Then the boy leaves her—alone, afraid, ashamed, and bitterly repentant. Do his business friends receive him as before? Yes. Perhaps they know, perhaps they do not know. It makes no difference. Is the home door shut in his face? No, because they do not know about his contemptible conduct. If they did it would make no difference. He is a man, and under the Double Standard he may do what pleases him.

The girl goes out into the world also. She enters the world of affairs, bearing the charm of her personality with the winsomeness of her girl nature and showing in her every attitude the joy of living. As a normal girl she is strongly sexed, affectionate and fun-loving.

She loves the pretty things of dress and adornment and the good times inseparable from contact with the young people about her. She likes the company of young men. She is unsuspecting and unafraid. But out of the mass of young men emerges one who secures her deepest interest and warmest affection. She trusts him fully and loves him so devotedly that her hopes and aspirations dissolve into his desires and ambitions. She thinks of him, for him, and with him during her waking hours, and dreams of a glorious future spent at his side. Her mother instinct calls loudly for expression, but she knows very little about her own physical being.

*Her mother has been afraid to teach her anything about the things of sex.* One day her lover whispers his eager longings into her ear. She shrinks back at the first, but her love for him is so very great and her desire to see him happy is so very strong that at the last she yields her body to his. Perhaps she becomes pregnant; perhaps she becomes diseased; perhaps both results may occur in her body. In any case, her betrayer casts her aside, flings her away from him scornfully and sneeringly, heeding not at all her pleadings or her entreaties wrung agonizingly from her great and pure love. The girl finds her pathway a veritable *Via Dolorosa*. Her friends pass her by on the other side. Her parents close to her the door of home, and she is forced to bear alone her shame, her sorrow and her disease.

What happens to the girl so bitterly betrayed? Some there are who pay the penalties in the loneliness of a rigid seclusion and who emerge to take up the duties of life purified and strengthened, but with the joy of living gone forever and their trust in mankind shattered into atoms.

Many there are who pass through their hours of travail with a sneer upon their lips and a devil-may-care attitude towards the world. These pass naturally into the ranks of the prostitutes. They do not express it in so many words, but their bearing and conduct say very plainly: "We are despoiled. Why should we worry? Man has broken our lives. We shall delight in spoiling his." Thus one woman deliberately plans to lead captive into the ways of death hundreds of youths and older men because one day her lover turned her great and pure love into a hideous and degrading shame.

We need a Single Standard of morals. We must have it if



we are to make America a good place in which to live. The two moral standards which are now spoken about and acquiesced in must become approximated, not by lowering the woman's to the man's, but rather by raising the man's to the woman's. If young men expect, as they do expect, their sweethearts to live straight and pure and true, they must themselves live the clean life, bringing to their wives when the bridal hour comes a healthy body and an untarnished soul.

## CHAPTER XXX

### THE WAY TO HER HOUSE\*

THE young man was "void of understanding." In plain words he was ignorant—*woefully ignorant*; he knew nothing of the peril which awaits every man who takes the way to her house. That is the kindest thing to say about the young man. For if he had only known he never would have trod the pathway leading thither. I am positive about that.

Shall we talk together, very plainly, about this awful, ugly plague-spot in our human society, which has blasted the lives and hopes of millions and has an ugly, horrid name—*prostitution*? It makes one shudder to pronounce the word, knowing only too well that there are in this old world of ours thousands upon thousands of women whose feet abide not in their houses, who are in the streets and in the dark places, lying in wait at every corner.

These women are prostitutes, harlots, harpies; they are called by many names. I care not whether they ply their nefarious trade as professionals, openly flaunting their shame, or clandestinely lure men during their hours of leisure from shop or factory, office or store. I care not whether they receive payment in current coin, or presents, or exact no toll whatever, they must all be labeled with the same hideous name.

Her house may be distinguished by the lurid red light above the doorway, or it may be in a cheap boarding house, or it may be in the city's most fashionable apartment house. It makes no difference. Anywhere, under the dome of God's sky, the youth who crosses her threshold is always in grave peril. There is no danger in the whole world like it.

The writer of the proverbs saw it, and his description of the ignorant youth and the enticing harlot is vividly true today, even to the minutest detail. The Book of Books is the greatest book in all the world because it portrays our human difficulties in bold, unmistakable language and definitely points the way of escape.

The young man will always be specially interested in those of the opposite sex, as indeed he ought to be. He has very fixed ideas about the attributes a good woman must possess. He sees them exemplified in his mother, his sister or the girl friend of his boyhood.

---

\* By Dr. Oswald C. J. Withrow.

The ancient writer points out most vividly the attributes of the woman who leads captive youth who doesn't know. She is *dressy*. Well, doesn't every girl love dress and beautiful things? Ah! yes, but the ideal girl dresses in good taste. Therein lies the difference, and if the girls of today are often misjudged, theirs is to blame.

The woman of the street is *wily*. She is enticing and tricky, ready to employ any artifice or stratagem which may deceive the one void of understanding. She whispers in his ear that if he is to be a man he needs to have sexual intercourse with women in order to keep healthy. Poor fellow! he doesn't know the truth. He has perchance heard the same statement many times. *There never was a greater lie uttered*. The youth who lives a continent life is healthier and better every way. Work, athletics and healthful amusements will keep our young man in tip-top condition.

Such a woman is *loud*, that is to say she is unrefined. This must necessarily follow from the kind of life she leads. The constant practicing of such base deception does not tend to the *finesse* of womankind. This kind of woman is *impudent*. Unblushingly forward, she catches our youth and kisses him. *What kisses!* Do they not sting and burn?

Ah! no. He is void of understanding and is led to her house because she is amazingly *flattering*. Smilingly she whispers, "I came forth to meet *thee*, diligently to seek *thy* face, and I have found *thee*." And the silly boy believes her honeyed words—*the pity of it!* And he passes with her through the streets to her house.

What then? Ah! then, there follows the inevitable retribution. For the woman is *diseased*. Her kind are nearly all *diseased*, but the youth doesn't know, and in sixty per cent of cases the woman herself doesn't know. The young man doesn't realize the tragedy of it all "till an arrow strike through his heart" and he experiences the awfulness of venereal disease. Even then he "knoweth not that it is for his life," for the woman is always a *murderess*. Is that language too strong? I think not. For, even though she doesn't slay the body, she kills a man's self-respect. He can never be the same again. She destroys the body, the mind and the soul, and "many strong men have been slain by her."

The woman is frequently found to be a mental defective—feeble-minded. Dr. C. K. Clarke is responsible for the statement



that of fifty-two prostitutes suffering from some form of venereal disease, thirty-six were feeble-minded or mentally deficient. Does our youth wish to consort with those whose intellects are subnormal? If he thinks at all he will surely be ashamed.

Let us take a look into her house. Let us scrape away the gilding and the tinsel and see what lies beneath. For there are a great many alluring externals which are intended to attract and which surely do attract all too often, the ignorant youth, as the moth has an insane desire for the light and beauty of the flame. The witchery of wantonness cannot be dismissed by a wave of the hand. It has to be reckoned with. The youth who doesn't know is almost certain to be led astray.

Just think of it! The enticing endearments lavished upon one youth are passed to the next victim in an hour or less. There is no love here; nothing but degrading depravity. Intoxicating liquor is almost always an accompaniment of affairs at her home. Many a man has confessed, with great bitterness, that he never would have fallen but for strong drink or the excitement following the goblet of wine.

Facts are sometimes ugly things, but will you look three of them squarely in the face and honestly ponder them?

*First Fact.* The record of a house of Prostitution:

SUNDAY, MAY 5th

Aline .....	11.....	2
Alice .....	11111111111111111111.....	20
Vera .....	1111111111111111.....	16
Kitty .....	111111111111111111111111.....	24
Mina .....	111111111111111111111111111111111111.....	36
Edith .....	1111111111.....	11
Florence .....	11111111111111111111.....	20

MONDAY, MAY 6th

Alice .....	1111111111111111.....	16
Vera .....	1111111111111111.....	17
Kitty .....	11111111111111.....	14
Mina .....	111111111111111111111111.....	22
Edith .....	1111111111111111.....	15
Florence .....	111111111111111111111111.....	23

## TUESDAY, MAY 7th

Alice .....	111111111111.....	11
Vera .....	1111111111111111.....	14
Kitty .....	111111111111.....	12
Mina .....	111111111111.....	12
Edith .....	1111111111111111.....	15
Florence .....	11111111111111111111.....	21
Sophy .....	11111111111111111111.....	18

## WEDNESDAY, MAY 8th

Alice .....	1111111111111111.....	15
Vera .....	1111111111111111.....	16
Kitty .....	111111111.....	9
Mina .....	1111111111.....	10
Edith .....	1111.....	4
Florence .....	11111111111111111111.....	21
Sophy .....	11111111111111111111.....	21

*Second Fact.* Six months' record of earnings in a dollar house of Prostitution with eighteen inmates:

December .....	\$ 9,229.00
January .....	7,837.00
February .....	6,894.00
March .....	8,494.00
April .....	8,266.00
May .....	9,936.00

---

Total .....\$50,656.00

Average men per day, per inmate, 15.

Do not these two facts show you something of the hideousness of the inside of her house?

*Third Fact.* To day we face a man and not a woman problem—

Commercialized by	} MAN
Supported by	
Fresh Victims Supplied by	

Can this record of hard facts fail to make its impression on the mind of our youth? Would he not rather lose his life than enter the pollution of her house? Can he not see the possibilities of disease and degradation?

In the last analysis you boys are largely to blame for there being immoral women. If you are really and truly gentlemen, there are two things you will not—can not do. You dare not be the one who will despoil a true-hearted, innocent girl, and you are certain you cannot consort with those who are the playthings of men who come and go. When every young fellow is prepared to go thus far there will be no such things as prostitutes.

It is in the proper teaching of the boys and girls of the present generation that our salvation lies. At the same time the State must provide proper and sufficient custodial care for all mental defectives. These are tasks that must be faced. Progress will come only through heroic effort.

Four words come readily to my mind as I think about the youth void of understanding, who enters the doorway of her house. I am writing this, as you must understand, for the fellow who thinks, for the fellow who wants to get out of life the best and biggest things. These four words are—*disgust—despair—disease—death*.

I have yet to find the fellow who has fallen for the first time who has not registered a marked degree of *disgust*. How could it be otherwise? As he thinks over his action, and calls up his ideal—of womanhood and realizes how low he has dragged his manhood he understands how nauseating it all is, and he bows his head in bitter shame. Far better to know beforehand the judgment of the mind and heart upon such departure from the pathway of true manhood. The true, pure love of husband and wife is the most wonderful and the most beautiful thing in all the world. It ought never to be spoiled by the memory of any disgusting alliance with any scarlet women.

Many a time I have had occasion to see *despair* written large upon some fellow's face after he has paid a visit to her house. He is afraid—*agonizingly afraid*. Fearful of what may happen to him; wondering day and night whether he will become diseased; no appetite; sleepless; wasteful of nervous energy. *He abides in Hell*. This is no fanciful picture. Any doctor knows that it is only too true. Many men have become desperate after taking the way to her house. *It's really not worth while, is it?*

*Disease* is a very real accompaniment of prostitution. Every man who patronizes prostitution contributes to the maintenance and spread of venereal diseases. Then think of this—there are no



diseases whose absolute prevention lies so wholly in human power as these. Can our youth afford to jeopardize his future and the future of his loved ones?

But can venereal disease not be cured? Yes—though it is a long, tedious, expensive road to travel and there is always the chance that a cure may not be effected or be thorough. Further, one must be absolutely truthful and say that *death* oftentimes results directly from a visit to her house. Not death in the acute stages; no sudden collapse with a fatal issue; not very often, I mean, although it does occur. But it is well known to medical men that syphilis kills at long range and gonorrhea kills indirectly. Years after the early symptoms of syphilis have passed away from the memory the man has to pay the penalty in a long, tedious malady, with death as the only and certain outcome.

The pure, young wife of a victim of gonorrhea, supposedly cured, has to suffer mutilation and occasionally death—and we must not, dare not, tell the truth upon the death certificate. *The pity of it.*

Is this morbid? Is it disheartening? One must admit its seriousness, but the remedy is so easy and so sure. “Go not astray in her paths.” That’s plain enough surely, and, what is more, it’s most excellent advice. Our youth must fill his life with the best and biggest things. Knowing himself thoroughly, he must push aside lascivious, lying suggestions and must always keep before his eyes the picture of ideal womanhood. There is nothing morbid about this.

The way to the house of the false enchantress begins with laughter and ends in *slaughter*, but our youth may travel the pathway of true love with laughter all the way—if *he will*.

## CHAPTER XXXI

### THE HOUSE OF SECRECY\*

MANY in discussing social hygiene have been led to believe that this new phase of social science was embodied entirely in problems relating to sex and to the control of social diseases. This is not true. Social hygiene is embodied in everything that has to do with human endeavor, with home life, with the health of the community, with childhood, with child life. It is vitally concerned with the problems of ethics. It is vitally concerned with the control of delinquents, whether the delinquent be a girl or boy who is full of life and is giving expression to some vicious practice because of the lack of proper training at home. Social hygiene is vitally concerned with the girl in the home. Why? Because the girl in the home is the potential mother of tomorrow. She is the one being upon whom all society should focus its eyes and depend upon to call into existence a new being of whom the world might feel proud.

My discussion will deal more particularly with the problem of social hygiene in its relation to social diseases, venereal diseases, and to the questions involved in child training and its ethical outlook.

I am concerned with the education of the young—the little boy and little girl in the home. I want to know whether parents are taking these little children, when they reach the age where vital questions are asked by them, and are telling them the truth.

When children ask the most beautiful question that can ever be asked of man or woman—"Where did I come from?" how are they being answered? I am not advocating the teaching of sex hygiene in public schools because I feel at the present time there are but few teachers who are competent to teach it intelligently. The child's brain is a tiny thing apparently, but is always busy. The child when only three, four or six years old suddenly sees a new baby somewhere in the neighborhood or maybe one has come into its home, and the natural question that enters its brain is—"where did baby come from?" "How did it get here?" So many mothers and fathers tell children the story of life in the way I

---

\* By Dr. Lee Alexander Stone.

received it. When I asked the truth I got a lie. I was told the stork brought me into the world. A very sweet mother came to me once and told me that her mother had told her she found her in the garden and that she had spent several weeks digging in that garden for a baby sister. She said, "When I found out my mother had lied to me I lost a certain amount of respect for her." "Oh," you say, "that could not be true, my child loves me in the same way it always did and I told it a similar story when it asked where it came from." Yes, perhaps, but there is a great deal of difference between love and respect. Look back to your own childhood and view your child psychology, think how you felt when you were put off with an apparent falsehood when you so desired an honest answer, and you will fully realize the truth of the above statement—let any individual tell you a lie, a lie that on the face of it you know should never have been told, and you lose a great part at least of your respect for that individual.

A little boy was called to the bedside of his mother to see the new baby. This mother was very proud of the product of her own body, as good mothers usually are. She showed the baby to him—a baby sister not more than two or three days old. The youngster immediately asked, "Mother where did baby come from?" What did mother do? Did she blush? Did she adopt a Puritanical attitude, or did she arise to the occasion as a woman should who felt surging in her body that maternal love which, properly interpreted, means the love of reproducing her kind. When the little boy asked, "Where did baby come from?" the mother answered, "Son, baby came from a little warm nest underneath mother's heart. Mother had to carry baby for a long, long time in her body, and mother gave baby her love, her strength, her blood, before baby could be born into the world." What did this little boy do? He thought a moment and asked, "Mother was I ever a part of you?" She replied, "You were just as much a part of me as little sister was." He said, "Mother, I love you more now than I ever did in all my life. I will always love you more." That little boy had been given an insight into *a new ethical system that would teach him forever to view every woman whom he met on the street and whom he might meet in the home, as being a potential mother.* My children, now nineteen and fifteen, have never been denied for one moment any information about themselves. Mrs. Stone and I both have taken



great pride in telling them things about themselves they should know. We feel certain, that if they ever go wrong, it will be with their eyes open. But what of the girls and boys who learn from youngsters on the street things that cause them to blush and to believe that their coming into existence was something that should not be talked about and that reproduction was a function unholy and unclean?

There is nothing unclean about life, about calling into existence a new being, even if that being is born as a result of illegitimate union outside of wedlock. Many times girls slip into what society calls a sin and what I term an error—not a sin. Many a girl slips because of ignorance or because of the fact that she has not a character sufficiently strong to withstand temptations that may be put in front of her. She falls, and an illegitimate child is born into the world. I hope the time will come when the United States will adopt the European system of adopting those we choose to call unfortunates and give them what is theirs—a rightful heritage.

*Let there be no more talk of illegitimate babies! Illegitimate parents there may be, but no illegitimate babies!*

If children are brought up in the wrong environment, if their heredity is not good, if their blood is not pure, who is to blame? They are not, their parents are to blame. When your mantle and mine which will fall on the shoulders of those for whose existence we are responsible, and who are to carry on after we are gone, is moth-eaten and unclean, civilization suffers. On the other hand, if we can boast of the fact that our blood is clear, free from the taint of syphilis and gonorrhea, we can enter into the bosom of our fathers with a smile on our lips and lie down in peace, feeling that we have done our full duty to ourselves, to our children, to our country and to our God.

Heretofore we have hesitated to discuss in the open anything that had to do with the relationship between the sexes. For us to mention sex relationships was for us to cause a blush to come to the maiden's cheek and a feeling of false modesty on the part of the young man, and a wish on the part of both that the subject had not been mentioned. Why are babies of opposite sex born? What is the great purpose for which we are called into existence? Biologically speaking, we are breeding animals, and it is our duty to reproduce our kind in a way that our kind

will reflect credit on us. This can be accomplished only through the eugenic mating of humans of opposite sex.

All over the world two diseases are sapping at the vitals of the human race. These two diseases, gonorrhea and syphilis, have been destroying men of every period since time began. One of the great Chinese Emperors 3,000 years before Christ, gathered all the writings on syphilis that had been compiled and written for a period of nearly 3,000 or 4,000 years prior to that. We know that syphilis is not a new disease, although some historians a few years ago were foolish enough to state that Columbus brought it to Europe when his sailors returned from the Isle of Haiti, and as a result syphilis became epidemic all over Europe. This was a physical impossibility because syphilis broke out as an epidemic almost immediately upon the arrival of the sailors in Spain. It was impossible for these sailors to come in contact with any person who lived in Serbia, Russia, Greece and elsewhere, and yet this scourge called syphilis, named after a shepherd boy "Syphilis," spread all over Europe. This disease has been handed down from time immemorial as a result mainly of immoral practices. We find Moses commanding that all women who were serving as captives should be destroyed. Why? Because men had lain with them and they were suffering from "issues of the flesh."

Gonorrhea is also of very ancient origin, and we are interested in what effect it has on the human race today. Gonorrhea is the cause of 80 per cent. of all blindness among new born babies. Truly, does the baby harvest the crop of wild oats that its father sowed when he was a young man. It causes certain female ailments and certain troubles occurring in the female pelvis. Many a woman who goes through life childless had she but know the cause, might have asked when her husband blamed her for not giving him a baby. "Why did you not take the right kind of treatment when you had gonorrhea and come to me clean and virile?" Gonorrhea may also produce a type of rheumatism or arthritis of the joints in the female as well as in the male. It frequently produces in the male pathologic conditions almost as disastrous as those produced in the female. Because of it the female in many instances is rendered an invalid for life.

The average woman foolishly does not inquire into the past life of the man she loves when he asks her hand in marriage.



She does not demand from him a certificate of health as to his physical condition. She does not ask the vital question, "Is your blood clean, and free from the taint of syphilis or gonorrhea that may destroy the life in me which is already crying for existence because of my love for you?" Love is physical and psychical. Properly defined, it means that two beings feel the biologic urge to bring into being a new life. They feel that they cannot longer be happy unless they join together in the bonds of wedlock, but how many girls live to regret, because of sex ignorance, that they ever saw a man, and more particularly their husbands, who, like themselves, had no knowledge of self or sex. Would it not be infinitely better if every woman in the United States and in the world, were compelled to protect herself and made to understand that self-preservation is the first law of nature? It is necessary for woman to protect her body, because in that body is contained the greatest element of all time which when combined with the male element goes to make a little quivering bit of flesh—a baby.

Every woman should demand a clean bill of health of the man who asks her hand in marriage. He should seek her family physician, or her father or mother should see to it that he does, and ascertain his state of health in order that his children would be guaranteed physical perfection. The woman, in like manner, should be examined, and for the same reason.

Syphilis is a deadlier disease than gonorrhea. A report compiled in 1917 by Sir William Osler stated that as a cause of death syphilis surpassed tuberculosis. He stated that it caused 40 to 60 per cent. of the deaths in the British Isles in 1916. It causes approximately  $33\frac{1}{3}$  per cent. of all insanity. Syphilis is the cause of locomotor ataxia, paralysis, softening of the brain, and of many types of degeneracy. Syphilis is a disease that may be handed down from one generation to another, even to the third and fourth. It frequently leaves its stigma on generation after generation. It displays itself in the beginning with a sore known as a chancre. It is a disease that may be contracted innocently or through contact with a dirty roller towel, a common drinking cup, or by coming in contact with mucous patches or sores in the mouth or on the lips or tongue of syphilitics or through kissing those infected and in many other ways. Records show that one soldier during the World War with secondary syphilitic sores in his mouth, kissed eight girls at a social gathering and each one



of them developed syphilis. They were compelled to take anti-syphilitic treatment even though their disease had been contracted innocently.

About forty-five days after the first stage of untreated syphilis a rash breaks out on the body which may look like smallpox or any one of the exanthematous diseases. A sore throat develops with white spots in the mouth known as mucous patches, also the hair begins to fall out. In the first and second stages the disease is highly contagious. There are no two diseases as contagious as gonorrhea and syphilis, and there are no two diseases so prevalent in human society and so constantly with us. We have 107,000,000 people in the United States, ten per cent. or 10,700,000 of whom have a syphilitic taint of one type or another. Seven hundred and seventy thousand boys reach the age of twenty-one years every year in America, and out of this number it is estimated by conservative statisticians that over 60 per cent., or 450,000, will contract gonorrhea or syphilis before they reach the age of thirty through immoral practices. This means that there are 450,000 new cases of syphilis and gonorrhea developing every year in the United States as the result of sex immorality. These figures, you say, are stupendous. Visit clinics, go to charitable institutions, visit homes and institutions wherein are charges of the state who are unable to take care of themselves, and have a blood test made on all those confined and you will be astonished at the number of syphilitics whose care is being paid for out of tax payers' pockets.

There are three stages of syphilis. The third stage is non-contagious in that it may not be passed by one individual to another by coming into personal contact with the disease. It may, however, be passed to an offspring in the mother's uterus and her child may be born with it. In this stage we find a more deadly condition existing. Here we find decay of the flesh and of certain bony structures, also the nervous system may be attacked. Decay of bones in the nose causing "saddle nose" and other deformities may be observed. I have seen parts of a face completely eaten away by syphilis.

I am not describing these conditions to horrify my readers, I am describing them with the hope that they will fight syphilis as they never have fought anything before in their lives. In addition to paralysis occurring late in life, which may be caused by

syphilis, we have paralysis occurring in the young man before he reaches forty, the cause of which in most instances may be directly traced to this disease. Syphilis is also the cause of many a woman having a series of miscarriages.

There is not a community that should not have in it a high class venereal disease clinic, patterned after The Illinois Social Hygiene League Clinic, Chicago, or Massachusetts General Hospital Clinic, Boston, or the Municipal V. D. Clinic of Detroit.

Unfortunately there are not at the present time many hospitals where men can be isolated, but the time is not far distant when, I hope, it will be possible to isolate men as women are now being isolated. In Chicago the Municipal Contagious Disease Hospital reserves two floors for the treatment of women infected with venereal diseases. A daily average attendance of 100 women patients diseased with gonorrhea or syphilis is kept up during a year. Does this mean that the Health Department is doing an injustice by confining them? No. Let me give you some interesting figures. A prostitute must have at least four contacts in an evening, to earn enough to pay for food and a bed and possibly some clothing; frequently she has twenty to forty, and in some instances, even more. Every prostitute sooner or later contracts a venereal disease from her male consort. Let us take four contacts daily as a general average. By operating the venereal disease section of the Contagious Disease Hospital, 400 contacts are prevented daily, which means in all probability that 400 cases of infection from venereal diseases are prevented daily in Chicago, which totals 12,000 cases per month or a grand total of 144,000 infections per year. Is a Municipal Hospital which treats venereal disease worth while? Individuals in the Municipal Contagious Disease Hospital in Chicago are treated carefully and humanely. The practice of caring for venereally infected women in this hospital was started by Dr. John Dill Robertson, Chicago's former Health Commissioner, in June, 1918. To the credit of the City of Chicago the work started by Dr. Robertson is being kept up by his successor.

We admit every doctor knows how to fight venereal diseases, but unfortunately for the medical profession, as well as for health officers, we have not been willing in the past to make mention of this fact. As a preventive for venereal disease during the World War venereal prophylaxis was used under what was



known as General Order 45. Every soldier who had a sex contact was ordered given this prophylactic treatment. A prophylaxis station was established in every division, in every regiment and in every town wherein soldiers were located, in order that venereal diseases would be reduced to a minimum. Great success was met with. England tried the measure, so did France and Germany. Even dark Russia tried and thus was demonstrated clearly beyond question of doubt that venereal prophylaxis was a success. Certain individuals do not believe in prophylaxis. They come forward with the charge that all moral bars are about to be let down and that if prophylactic stations are established and prophylactic packets sold, license will run rampant. Such has not proven to be the case. Sir Archdall Reid, (London), who has made a very extensive study of venereal diseases, has recently in his new book, "The Prevention of Venereal Diseases," stated absolutely that prophylaxis is the thing. Is it not time for the medical profession and for the world at large to adopt preventive measures in order that young men and young women may be saved from the terrors of the realization that their lives have been ruined by venereal disease? Professor Eli Metchnikoff a number of years ago discovered that a particular ointment made up of calomel and other ingredients was a successful preventive of venereal disease. Modern prophylaxis is the result of his studies.

I am won over to the cause of prophylaxis and if I had the right, prophylactic packages would be sold and prophylactic stations would be established in every city. *Just so long as we have a double moral standard, just so long as we hold to the old idea that continence is harmful, just so long as we lose control of our appetites, that long are we going to have immorality with gonorrhea and syphilis as the penalty paid for our failure to respect nature's most wonderful gift—the reproductive impulse.* And until we learn better, prophylaxis is the thing.

We guard against diphtheria in the home by giving a dose of diphtheria antitoxin or of toxin antitoxin. If we suspect that the child has come in contact with diphtheria we make a test to find out whether or not it is susceptible to the disease. If it is susceptible, we administer antitoxin or toxin antitoxin as a prophylactic measure. In many cases of injury a prophylactic dose of tetanus antitoxin is given. During the World War every man was given a dose of typhoid vaccine. Why? To prevent a repeti-



tion of the frightful experience during the Spanish-American war when thousands of cases of typhoid fever were contracted by men in uniform. The use of such prophylactic measures has never been considered immoral nor have they been tabooed by the church. The same should be true of social diseases which should be viewed in like manner as other contagious and infectious diseases are viewed by the public, and prevented if possible. Prophylaxis is worthy of your consideration and it is my hope that you will reach the conclusion that it would be infinitely better if prophylaxis were in use today to prevent the spread of the two deadliest maladies of all time, than to have them destroying thousands needlessly every year.

Give children better training. Teach them more about themselves. No child who has had proper sex training at home is in danger of going wrong without full knowledge on its part. Play a game of fifty-fifty with children. Take them into your confidence and tell them the wonderful story of life, how they came from tiny cells a twelve hundredth of an inch in diameter, and gradually grew into the great things they are today. Throw aside prudishness, discard old teachings that condemn children to darkness, for new ones which lead into a path of light and of right action which will drive to cover the vicious man-made institution of mock modesty, fight for a single standard of morals and the time may come when even prophylaxis will not be needed.

Teach children to laugh, to love and to lift! When they learn to laugh two-thirds of the world's enemies are conquered. When they learn to love one-half of the third that is left is beaten. When they can lift they can reach to the very stars, then they can see with a naked eye that beautiful truth which protects itself, see beyond the clouds, which is so hard for most of us to do.

## CHAPTER XXXII

### THE PROBLEM OF SEXUAL HYGIENE\*

IT IS impossible to doubt the vitality and the vigor of the new movement of sexual hygiene, especially that branch of it concerned with the instruction of children in the essential facts of life. In the eighteenth century the great educationist, Basedow, was almost alone when, by practice and by precept, he sought to establish this branch of instruction in schools.

A few years ago, when the German Durerbund offered prizes for the best essays on the training of the young in matters of sex, as many as five hundred papers were sent in.

We may say that during the past ten years more has been done to influence popular feeling on this question than during the whole of the preceding century.

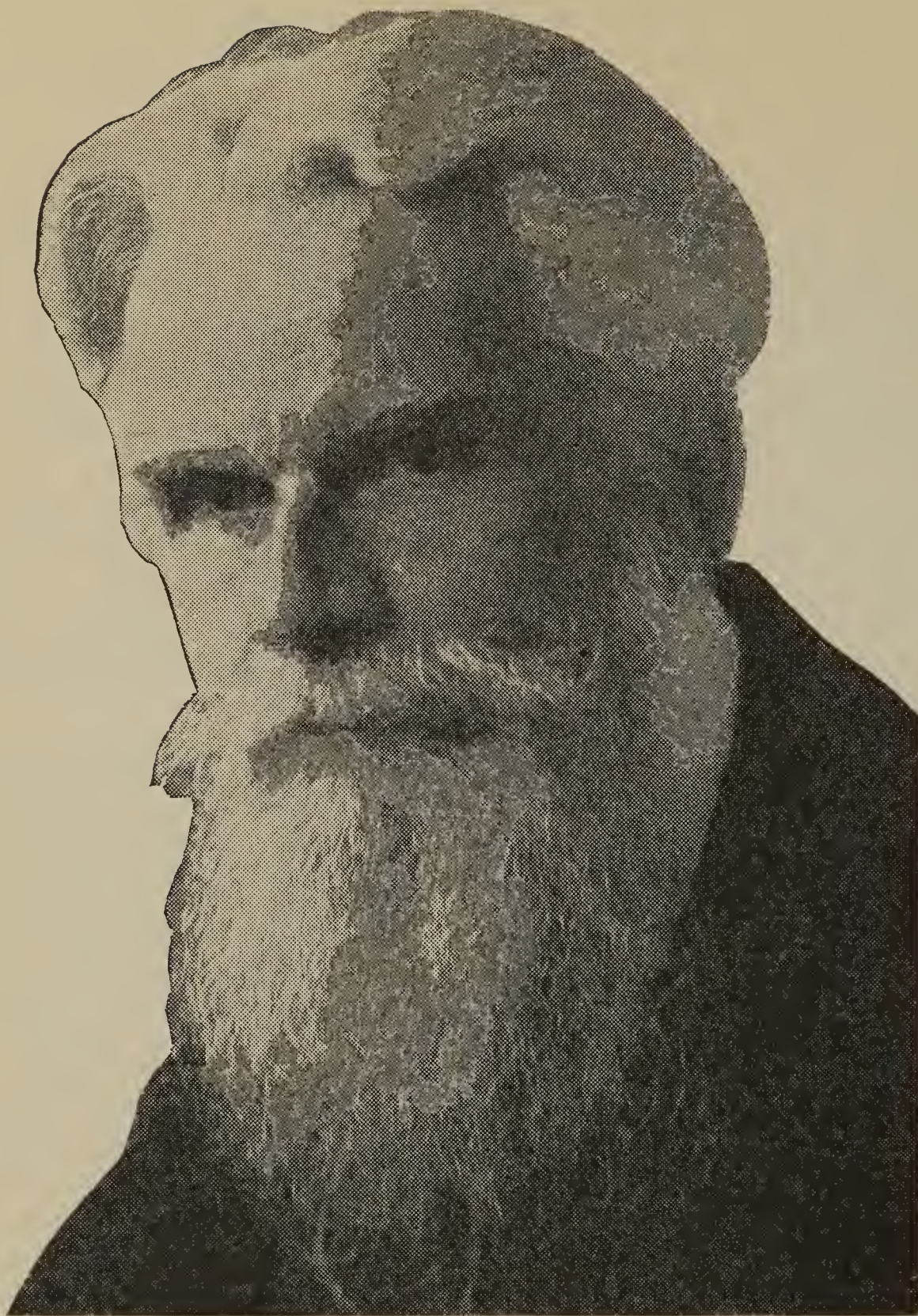
Whenever we witness a sudden impulse of zeal and enthusiasm to rush into a new channel, however admirable the impulse may be, we must be prepared for many risks and perhaps even a certain amount of damage. This is, indeed, especially the case when we are concerned with a new activity in the sphere of sex. The sexual relationships of life are so ancient and so wide, their roots ramify so complexly and run so deep, that any sudden disturbance in this soil, however well-intentioned, is certain to have many results which were not anticipated by those responsible for it. Any movement here runs the risk of defeating its own ends, or else, in gaining them, to render impossible other ends which are of not less value.

In this matter of sexual hygiene we are faced at the outset by the fact that the very recognition of any such branch of knowledge as "sexual hygiene" involves not merely a new departure, but the reversal of a policy which has been accepted, almost without question, for centuries. Among many primitive peoples, indeed, we know that the boy and girl at puberty are initiated with solemnity, and even a not unwholesome hardship, into the responsibilities of adult life, including those which have reference to the duties and privileges of sex.

---

\*By Havelock Ellis in *Task of Social Hygiene*.





HENRY HAVELOCK ELLIS

This famous scientist was born in the County of Surrey, which has been called the "Garden of England," on Feb. 2, 1859. Coming from seafaring ancestors, much of his childhood was passed at sea. After teaching school for several years in Australia, he returned to England and studied medicine, but only practiced a short time, having become interested in literary work and original scientific researches. His magnificent work, "Psychology of Sex," appeared in six volumes from 1897-1903, and is often quoted in the pages of this book.



But in our own traditions scarcely even a relic of any such custom is preserved. On the contrary, we tacitly maintain a custom, and even a policy, of silent obscurantism. Parents and teachers have considered it a duty to say nothing and have felt justified in telling lies, or "fairy tales," in order to maintain their attitude. The oncoming of puberty, with its alarming manifestations, especially in the girl, has often left them unmoved and still silent. They have taken care that our elementary textbooks on anatomy and physiology, even when written by so independent and fearless a pioneer as Huxley, should describe the human body absolutely as though the organs and functions of reproduction had no existence. The instinct was not thus suppressed; all the inevitable stimulations which life furnishes to the youthful sexual impulse have continued in operation.\*

Sexual activities were just as liable to break out. They were all the more liable to break out, indeed, because fostered by ignorance, often unconscious of themselves, and not held in check by the restraints which knowledge and teaching might have furnished. This, however, has seemed a matter of no concern to the guardians of youth. *They have congratulated themselves if they could pilot the youths, and especially the maidens, under their guardianship into the haven of matrimony not only in apparent chastity, but in ignorance of nearly everything that marriage signifies and involves, alike for the individual and the coming race.*

This policy has been so firmly established that the theory of it has never been clearly argued out. So far as it exists at all, it is a theory that walks on two feet pointing opposite ways: sex things must not be talked about because they are "dirty;" sex things must not be talked about because they are "sacred." We must leave sex things alone, they say, because God will see to it that they manifest themselves aright and work for good; we must leave sex things alone, they also say, because there is no department in life in which the activity of the Devil is so specially exhibited. The very same person may be guilty of this

---

\*Moll in his wise and comprehensive work, *The Sexual Life of the Child* (German ed., p. 225), lays it down emphatically that "*we must clearly realize at the outset that the complete exclusion of sexual stimuli in the education of children is impossible.*" He adds that the demands made by some "fanatics of hygiene" would be dangerous even if they were practicable. Games and physical exercises induce in many cases a considerable degree of sexual stimulation. But this need not cause us undue alarm, nor must we thereby be persuaded to change our policy of recommending such games and exercises.

contradiction, when varying circumstances render it convenient. Such a confusion is, indeed, a fate liable to befall all ancient and deeply rooted *tabus*; we see it in the *tabus* against certain animals as foods (as the Mosaic prohibition of pork); at first the animal was too sacred to eat, but in time people came to think that it is too disgusting to eat. They begin the practice for one reason, they continue it for a totally opposed reason. Reasons are such a superficial part of our lives!

Thus every movement of sexual hygiene necessarily clashes against an established convention which is itself an inharmonious clash of contradictory notions. This is especially the case if sexual hygiene is introduced by way of the school. It is very widely held by many who accept the arguments so ably set forth by Frau Marie Lischnewska, that the school is not only the best way of introducing sexual hygiene, but the only possible way, since through this channel alone is it possible to employ an antidote to the evil influences of the home and the world.\*

Yet to teach children what some of their parents consider as too sacred to be taught, and others as too disgusting, and to begin this teaching at an age when the children having already imbibed these parental notions, are old enough to be morbidly curious and prurient, is to open the way to a complicated series of social reactions which demand great skill to adjust.

Largely, no doubt, from anxiety to counterbalance these dangers, there has been a tendency to emphasize, or rather to over-emphasize, the moral aspects of sexual hygiene. Rightly considered, indeed, it is not easy to over-value its moral significance. But in the actual teaching of such hygiene it is quite easy, and the error is often found, to make statements and to affirm doctrines all in the interests of good morals and with the object of exhibiting to the utmost the beneficial tendencies of this teaching—which are dubious at the best and often at variance

---

\*See Frau Marie Lischnewska's excellent pamphlet, *Geschlechtliche Belehrung der Kinder*, first published in *Mutterschutz*, 1905, Heft 4 and 5. This is perhaps the ablest statement of the argument in favor of giving the chief place in sexual hygiene to the teacher. Frau Lischnewska recognizes three factors in the movement for freeing the sexual activities from degradation: (1) medical, (2) economic, and (3) rational. But it is the last—in the broadest sense as a comprehensive process of enlightenment—which she regards as the chief. "The views and sentiments of people must be changed," she says. "The civilized man must learn to gaze at this piece of Nature with pure eyes; reverence towards it must early sink into his soul. In the absence of this fundamental renovation, medical and social measures will merely produce refined animals."



with actual experience. In such cases we seem to see that the sexual hygienist has indeed broken with the conventional conspiracy of silence in these matters, but he has not broken with the conventional morality which grew out of that ignorant silence. With the best intention in the world he sets forth, dogmatically and without qualification, ancient half-truths which to become truly moral need to be squarely faced with their complementary half-truths. The inevitable danger is that the pupil sooner or later grasps the one-sided exaggeration of this teaching, and the credit of the sexual hygienist is gone. Life is an art, and love, which lies at the heart of life, is an art; they are not science; they cannot be converted into clear-cut formulæ and taught as the multiplication table is taught. Example here counts for more than precept, and practice teaches more than either, provided it is carried on in the light of precept and example. *The rash and unqualified statements concerning the immense benefits of continence, or the awful results of self-abuse, etc., frequently found in books for young people will occur to every one. Stated with wise moderation they would have been helpful. Pushed to harsh extravagance they are not only useless to aid the young in their practical difficulties, but become mischievous by the injury they inflict on over-sensitive consciences, fearful of falling short of high-strung ideals.* This consideration brings us, indeed, to what is perhaps the chief danger in the introduction of any teaching of sexual hygiene: *the fact that our teachers are themselves untaught.* Sexual hygiene in the full sense—in so far as it concerns individual action and not the regulative or legislative action of communities—is the art of imparting such knowledge as is needed at successive stages by the child, the youth and maiden, the young man and woman, in order to enable them to deal rightly, and so far as possible, without injury either to themselves or to others, with all those sexual events to which every one is naturally liable. To fulfill his functions adequately the master in the art of teaching sexual hygiene must answer to three requirements: (1) he must have a sufficing knowledge of the facts of sexual psychology, sexual physiology, and sexual pathology, knowledge which, in many important respects, hardly existed at all until recently, and is only now beginning to become generally acces-



sible; (2) he must have a wise and broad moral outlook, with a sane idealism which refrains from demanding impossibilities, and resolutely thrusts aside not only the vulgar platitudes of worldliness, but the equally mischievous platitudes of an outworn and insincere asceticism, for the wise sexual hygienist knows, with Pascal, that "he who tries to be an angel becomes a beast," and is less anxious to make his pupils ineffective angels than effective men and women, content to say with Browning, "I may put forth angels' pinions, once unmanned, but not before"; (3) in addition to sound knowledge and a wise moral outlook, the sexual hygienist must possess, finally, a genuine sympathy with the young, an insight into their sensitive shyness, a comprehension of their personal difficulties, and the skill to speak to them simply, frankly, and humanly. If we ask ourselves how many of the apostles of sexual hygiene combine these three essential qualities, we shall probably not be able to name many, while we may suspect that some do not even possess one of the three qualifications. If we further consider that the work of sexual hygiene, to be carried out on a really national scale, demands the more or less active co-operation of parents, teachers, and doctors, and that parents, teachers, and doctors are in these matters at present all alike untrained, and usually prejudiced, we shall realize some of the dangers through which sexual hygiene must at first pass.

It is, I hope, unnecessary for me to say that, in thus pointing out some of the difficulties and the risks which must assail every attempt to introduce an element of effective sexual hygiene into life, I am far from wishing to argue that it is better to leave things as they are. That is impossible, not only because we are realizing that our system of incomplete silence is mischievous, but because it is based on a confusion which contains within itself the elements of disruption. We have to remember, however, that the creation of a new tradition cannot be effected in a day. Before we begin to teach sexual hygiene the teachers must themselves be taught.

There are many who have insisted, and not without reason, on the right of the parent to control the education of the child. Sexual hygiene introduces us to another right, the right of the child to control the education of the parents. *For few parents today are fitted to exercise the duty of training and guiding the*

*child in the difficult field of sex without preliminary education, and such education, to be real and effective, must begin at an early age in the parents' life.\**

*The school teacher, again, on whom so many rely for the initial stage in sexual hygiene, is at present often in almost exactly the same stage of ignorance or prejudice in these matters as his or her pupils. The teacher has seldom been trained to impart even the most elementary scientific knowledge of the facts of sex, of reproduction, and of sexual hygiene, and is more often than not without that personal experience of life in its various aspects which is required in order to teach wisely in such a difficult field as that of sex, even if the principle is admitted that the teacher in class, equally whether addressing one sex or both sexes, is not called upon to go beyond the scientific, abstract, and objective aspects of sex.*

This difficulty of the lack of suitable teachers is not, indeed, insuperable. It would be largely settled, no doubt, if a wise and thorough course of sexual hygiene and pueri-culture formed part of the training of all school teachers, as, in France, Pinard has proposed for the Normal schools for young women. Dr. W. O. Henry, in a paper before the Nebraska State Medical Association in May, 1911, put forward the proposal: "Let each State have one or more competent physicians whose duty it shall be to teach these things to the children in all the public schools of the State from the time they are eight years of age. The boys and girls should be given the instruction separately by means of charts, pictures, and stereopticon views, beginning with the lower forms of life, flowers, plants, and then closing with the organs in man. These lectures and illustrations should be given every year to all the boys and girls separately, having those from eight to ten together at one time, and those from ten to twelve, and those from over twelve to sixteen." Dr. Henry was evidently not aware that the principle of a special teacher appointed by Government to give special instruction in matters of sex in all State schools had already been adopted in Canada, in

---

\*"We parents of today," as Henriette Furth truly says ("Erotik und Elternpflicht," *Am Lebensquell*, p. 11), "have not yet attained that beautiful naturalness out of which in these matters simplicity and freedom grow. And however willing we may be to learn afresh, most of us have so far lost our inward freedom from prejudice—the standpoint of the pure to whom all things are pure—that we cannot acquire it again. We parents of today have been altogether wrongly brought up. *The inoculated feeling of shame still remains even after we have recognized that shame in this connection is false.*"



the province of Ontario; the teacher thus appointed goes from school to school and teaches the elements of sexual physiology and anatomy, and the duty of treating sexual matters with reverence, to classes of boys and of girls from the age of ten. The course is not compulsory, but any School Board may call upon the special teacher to deliver the lectures. This appointment has met with so much approval that it is proposed to appoint further teachers on the same lines, women as well as men.

It is not necessary that the school teacher of sex should be a physician. For personal and particular advice on the concrete difficulties of sex, however, as well as for the more special and detailed hygiene of the sexual relationship and the precautions demanded by eugenics, we must call in the physician. Yet none of these things so far enter the curriculum through which the physician passes to reach his profession; he is often only a layman in relation to them. Even if we are assured that these subjects form part of his scientific equipment, that fact by no means guarantees his tact, sympathy, and insight in addressing the young, whether by general lectures or individual interviews, both these being forms of imparting sexual hygiene for which we may properly call upon the physician, especially towards the end of the school or college course, and at the outset of any career in the world.\*

Undoubtedly we have amongst us many mothers, teachers, and physicians who are admirably equipped to fulfil their respective parts—elementary, secondary, and advanced—in the work of sexual hygiene. But so long as they are few and far apart their influence is negatived, if it is not even rendered harmful.

It must often be useless for a mother to instil into her little boy respect for his own body, reverence for the channel of motherhood through which he entered the world, any sense of the purity of natural functions or the beauty of natural organs, if outside his home the little boy finds that all other little boys and girls regard these things as only an occasion for sniggering.

---

\*The method of imparting a knowledge of sexual hygiene (especially in relation to venereal diseases) at the outset of adult life has most actively been carried out in Germany and the United States. In Germany lectures by doctors to students and others on these matters are frequently given. In the United States information and advice are spread abroad chiefly by the aid of societies. The American Society of Sanitary and Moral Prophylaxis, with which the name of Dr. Morrow is specially connected, was organized in 1905. The Chicago Society of Social Hygiene was established in 1906. Since then many other similar societies have sprung up under medical auspices in various American cities and states.



*It is idle for the teacher to describe plainly the scientific facts of sex as a marvelous culmination in the natural unfolding of the world if, outside the schoolroom, the pupil finds that, in the newspapers and in the general conversation of adults, this sacred temple is treated as a common sewer, too filthy to be spoken of, and that the books which contain even the most necessary descriptions of it are liable to be condemned as "obscene" in the law courts.\**

It is vain for the physician to explain to young men and women the subtle and terrible nature of venereal poisons, to declare the right and the duty of both parents in marriage to know, authoritatively and beforehand, the state of each other's health, or to warn them that a proper sense of responsibility towards the race must prevent some ill-born persons from marrying, or at all events from procreating, if the young man and woman find, on leaving the physician, that their acquaintances are prepared to accept all the risks, light-heartedly, in the dark, in a heedless dream from which they somehow hope there will be no awful awakening.

The moral to which these observations point is fairly clear. Sex penetrates the whole of life. It is not a branch of mathematics, or a period of ancient history, which we can elect to teach, or not to teach, as may seem best to us, which if we teach we may teach as we choose, and if we neglect to teach it will never trouble us. Love and hunger are the foundations of life, and the impulse of sex is just as fundamental as the impulse of nutrition. It will not remain absent because we refuse to call for its presence, it will not depart because we find its presence inconvenient. At the most it will only change its shape, and mock at us from beneath masks so degraded, and sometimes so exalted, that we are no longer able to recognize it.

"People are always writing about education," said Chamfort more than a century ago, "and their writings have led to some valuable methods. But what is the use, unless side by side with the introduction of such methods, corresponding reforms are not introduced in legislation, in religion, in public opinion? The only object of education is to conform the child's reason to that of the community. But if there is no corresponding reform in

---

\*Many flagrant cases in point are set forth from the legal point of view by Theodore Schroeder, "*Obscene Literature and Constitutional Law*," New York, 1911, chap. IV.

the community, by training the child to reason you are merely training him to see the absurdity of opinions and customs consecrated by the seal of sacred authority, public or legislative, and you are inspiring him with the contempt of them." We cannot too often meditate on these wise words.

It is useless to attempt to introduce sexual hygiene as a subject matter, and in some respects it may be dangerous. When we touch sex we are touching sensitive fibres which thrill through the whole of our social organism, just as the touch of love thrills through the whole of the bodily organism. Any vital reform here, any true introduction of sexual hygiene to replace our traditional policy of confused silence, affects the whole of life or it affects nothing. It will modify our social conventions, enter our family life, transform our moral outlook, perhaps reinspire our religion and our philosophy.

That conclusion need by no means render us pessimistic concerning the future of sexual hygiene, nor unduly anxious to cling to the policy of the past. But it may induce us to be content to move slowly, to prepare our movements widely and firmly, and not to expect too much at the outset. By introducing sexual hygiene we are breaking with the tradition of the past which professed to leave the process by which the race is carried on to Nature, to God, *especially to the devil*. We are claiming that it is a matter for individual personal responsibility, deliberately exercised in the light of precise knowledge which every young man and woman has a right, or rather a duty, to possess. That conception of personal responsibility thus extended to the sphere of sex in the reproduction of the race may well transform life and alter the course of civilization. It is not merely a reform in the classroom, it is a reform in the home, in the church, in the law courts, in the legislature. If sexual hygiene means that, it means something which can only come slowly, with difficulty, with much searching of hearts. If, on the other hand, sexual hygiene means nothing but the introduction of a new formal catechism, and an occasional goody-goody perfunctory exhortation, it may be introduced at once, quite easily, without hurting anyone's feelings. But, really, it will not be worth worrying about, one way or the other,

PART II  
SEX SEARCHLIGHTS



## INTRODUCTION

*THIS chapter contains several hundred extracts, selected with great care from the enormous accumulation of literature on Sexology. Much time and labor has been spent to be sure all aspects of the subject are considered. Over one hundred authors are quoted, and among them are to be found—physicians, clergymen, educators, attorneys, social reformers, representative journals, as well as the official utterances of several State Boards of Health.*

*In many instances conflicting opinions are set forth, in order that the reader may be in possession of both sides of the question, and form an opinion accordingly.*

*It is confidently expected that a perusal of the selections will prove both interesting and instructive.*

## PART II

# SEX SEARCHLIGHTS

Notwithstanding very strong assertions to the contrary, and by authorities who profess to have thoroughly studied the question, no sufficiently valid objections have been established upon reasonable grounds, or upon facts of physiology and health, to living, nay, to passing life in a state of celibacy. The argument that if marriage cannot for various reasons be carried out, it is nevertheless necessary, upon physiological grounds, that a substitute of some kind should be found, is altogether erroneous and without foundation. It cannot be too distinctly stated that the strictest temperance and purity is as much in accordance with physiological as moral law, and that the yielding to desire, appetite, and passion is no more to be justified upon physiological or physical than upon moral or religious grounds.—*Dr. Lionel S. Beale.*

\* \* \* \* \*

*Unprofessional Ethics.*—The doctor who would conceal the truth about a murder or a robbery because the perpetrator happened to be a patient of his would rightly be regarded as an enemy of Society. Why should the crime of silence in regard to an offense which destroys the soul as well as the offender himself, and causes untold suffering, perhaps death to others, be countenanced by the law and the medical profession?

It is about time that the curse of secret immorality should be dragged out of its hiding place and exposed to the light. If every physician was compelled by law—and it is a crime against Society that he is not—to be truthful in these matters, this black plague of sexual immorality, with its evil progeny, would be tremendously circumscribed. If every young man, every husband and father, knew that his secret sin would be made public, that he would be disgraced in the eyes of his family, his community, there would be comparatively few male—or female—prostitutes.—*Rev. Orison Swett Marsden.*

There is no question that the honeymoon is often an ordeal, and not infrequently a tragedy for the inexperienced woman. The experience of this episode may imply a complete reversal of all the maidenly views upon love and marriage. Serious mental shock, leading to hysteria and other neurotic disturbance, is by no means uncommon. So subtle and delicate are the emotions aroused that one injudicious phrase may sink into the mind, and set up an inner conflict or repugnance lasting for the whole of married life. There are blunders and indiscretions that some women can never really forget. A woman of fine mental fiber and sensitive feeling, a modern type of temperament conspicuous in the refined classes, may possess the deepest capacity for love and for reciprocal fervor, and yet live always secretly estranged in soul from the husband who has acted thoughtlessly, selfishly, or ignorantly in the early days of conjugal union.—*Walter M. Gallichan.*

\* \* \* \* \*

Why put this *vital and wholesome movement for sex education* upon the low plane of fear for the consequences if one transgresses? I don't believe fear is a high ethical concept to which to appeal. Our efforts must be turned not towards frightening the young to do right, but towards the inculcation of that right-thinking which leads to right-doing. *Education is the proper method to curb licentiousness. We must take the child from its birth and teach it self-control. Education of girls is the crux of the problem.* They themselves are the ones to train boys to self-control, for the male sex is the aggressor, and the female does not fall except by lack of will-power and self-control. Once all women made it plain that they will not marry a man who has not a certificate of health, once all womankind resolves she would rather be a healthy "old maid" than an infected wife, the problem of sex hygiene will be solved then, but not until then.—*Dr. Ira S. Wile.*

\* \* \* \* \*

Patients who have been thoroughly quacked are often markedly neurasthenic, as a consequence of dishonest suggestion and subsequent brooding over real imaginary ills. Such patients are passed along from one quack to another until, by the time they become discouraged with quacks and seek the aid of a



reputable physician, the golden opportunity of correcting their mental state is likely to be practically lost.

*If the laity ever becomes intelligent enough to understand that an alleged guarantee is alone sufficient to stamp the quack as a scoundrel, quackery will be put out of business. Meanwhile, if prospective patrons of the quack will merely submit the contracts and "guarantees" to a good lawyer before going on with the so-called treatment a serious "crimp" will be put in the quack shop.—Dr. G. Frank Lydston.*

\* \* \* \* \*

While improvement of dancing will reduce its dangers, it will not eliminate the problem of self-control for normal young men. They must learn to understand their own emotions. They should be forewarned that others have found danger in dancing. They should know that some strong-willed men have given up dancing when they found that it made more intense the problem of sexual self-control, both mentally and physically. They should know the increased danger if dancing is associated with alcohol, vicious women, immodest dress, extreme freedom of conduct, and other morally depressing influences. Such knowledge along with general sex-education will do much to make dancing not only safe for average young men, but also helpful along social and esthetic lines.—*Prof. Maurice A. Bigelow.*

\* \* \* \* \*

A young girl may very well marry at seventeen or eighteen, or at any rate between eighteen and nineteen. She is then sexually mature and her mentality is sufficiently developed, so that the difference in age we have required may be obtained. Young people thus united may continue their studies before procreating children, and their marriage will stimulate them to work.

It is absolutely necessary to avoid everything which causes separation or exclusion, even in appearance. At the risk of appearing ridiculous in the eyes of certain superior persons, I repeat that separation of beds and bedrooms is a dangerous experiment to make in marriage, and that it may easily lead to estrangement, even when based on the highest motives.

It is the same, in a still higher degree, with sexual continence in marriage, even when it does not last for years, excepting in cases of grave disease or senile impotence.—*Dr. August Forel.*

The indirect cause for all the unfathomable worries in many women, the reason for the intense anxiety about self, is due to the repression of sex impulses. The longing to know, to comprehend, to find some mode of expression is always with the young woman and girl and is left for her to solve unaided. At that age in adolescence when confession and instruction would have relieved this repression and longing, the girl is further repressed and suppressed in all her curiosity and the wish to have mental and soul purging—to have cleaned out those deleterious memory spots of childhood's impressions. This clearing of the mind so that the subconscious can produce no psychic shock is not done today.

We all know what a real shock is to the conscious mind. Well, repression is a shock to the subconscious mind, and in this fact lies the reason for that destructive worry which so many women are unable to avoid.—*Dr. Wm. Lee Howard.*

\* \* \* \* \*

The illegality, under present disgraceful laws, of the dissemination of proper contraceptive information to those who need it, makes it incumbent on each individual couple to repudiate unjustifiable law, which is no doubt also unconstitutional, and seek comfort, health, and efficiency for themselves, and choose between poverty and handicap on the one hand and proper food and sufficient early training on the other, for their children. It seems as if every doctor and humanitarian must advise people faced with this contingency to seek until they obtain some form of adequate protection which interferes neither with health nor with perfectly satisfactory, mutual sexual relations. There are unquestionably such adequate forms of protection; and adequate or inadequate ones are used by most married, fertile men and women of the intellectual classes through portions of their married lives, it makes little difference whether such a family is Jew, Gentile, Catholic, black or white, Christian or pagan, bond or free.—*Dr. W. F. Robie.*

\* \* \* \* \*

There are thousands of syphilitics who are wandering around unable to pay the prices which the physician asks to treat this disease. The same can be said of gonorrhea, and the same physician who clamors against the prices of the so-called quack,

forgets that the price he asks of the public is exorbitant in the extreme. So the only course for the individual to take, if he cannot pay the price, is to remain a menace to Society. The physician assumes no responsibility toward society to find out if the patient is under treatment elsewhere; the patient can do as he pleases with his disease when he closes the doctor's door. This, then is the situation as regards society's attitude toward the venereal subject: Society seems to take a different attitude towards other contagious and infectious diseases, such as measles, chicken pox, diphtheria, etc. In these diseases, a physician has some responsibility towards society, he must report each case as it comes to his attention, to the Board of Health, who in turn assumes some responsibility by isolating the disease.—*Mrs. Margaret H. Sanger.*

\* \* \* \* \*

*The Safe or Sterile Period.*—It is a well-known fact that there are certain sterile days every month with most if not all women; and that these begin from the ninth to the nineteenth day after menstruation has ceased and continue until her next period. If, then, it can be determined in each individual case just when this time commences and how long it continues, then subtract eight days, the longest time spermatozoa have been known to live in her genital tract, and you have an absolutely sure thing. Suppose, for instance, that the woman is regular, beginning every twenty-eighth day, the flow ceasing on the fourth day; count twelve days for her fruitful period, which is a fair average, and five days for the life of the spermatozoa, also a fair average, and you have seven safe days—enough for any man or woman in one month. It would almost seem as though Nature had arranged this whole matter, providing for continence about three-fourths of the time. In many cases the sterile period is much longer, giving about twice as many days. In some few instances it seems utterly unreliable.—*Evangelist M. B. Williams.*

\* \* \* \* \*

*Gonorrhea and Rheumatism.*—If a young man who has a history of "acute inflammatory rheumatism," even if it was five years ago, asks for the hand of your daughter, refuse it until you can get the TRUE cause of this "rheumatism." Don't be blinded by such terms as "arthritis," "suppurative synovitis," "myositis,"



or any other euphemisms—*get the facts*. If it is proven to your satisfaction that the cause of the “rheumatism” was gonorrhea, absolutely refuse to allow the marriage to take place. If you do not you are responsible for a crime; for bringing pain, disgrace, death to your daughter. *Better kill her at once than allow her to die slowly, unsexed, despondent and cursing you for keeping her in ignorance of these diseased states of so many young men.* If you parents, who have a little knowledge of these affairs had taught what you do know to your daughters, then many a hasty marriage would be stopped; many an elopement impossible; for if the girl knew WHY you refused your consent, she would also refuse.—*Dr. Wm. Lee Howard.*

\*   \*   \*   \*   \*

A young man has a deep-seated posterior gonorrheal gleet—hardly noticeable, perhaps. He gets married. The germ, half-starved from trying to live in worn-out tissue is thrown out from the husband. The bride develops an acute gonorrhea, since the germ transplanted to a fresh soil, gratefully welcomes the change and comes to life with renewed and malignant vitality. To his amazement, the young husband may acquire an anterior infection or a “new dose” of gonorrhea. The husband becomes suspicious and angry and accuses his wife of having infected him. Results: *tearful denial, separation, divorce, perhaps hospital operation for wife, husband seeks another bride to infect. Is humanity any better off for such ignorance?*—*Indiana State Board of Health.*

\*   \*   \*   \*   \*

I find a tendency among most grown-ups, especially among teachers and advanced parents, who ought to know better, to place too firm a reliance on moral teaching and sexual enlightenment as a means of saving our daughters and our sons from making the same mistakes in their lives that we ourselves have made. Like those drowning in deep waters where they cannot swim, we have clutched at any plank of hope. You see, so many of the old planks—religion, social barriers, chaperons, home restrictions, and so many more, on which our parents used to rely, have failed us, broken in our hands by the vigorous destroying of the young generation, and, therefore we have clutched with frantic fingers at this new fair-looking life raft, in pursuit of the one aim to protect our children. Myself, I have done this. It is with

uttermost sadness I have to acknowledge now that I do not believe we can help the young very far or deeply by all our teaching. Not only do they want their own experience, not ours, but it is right for them to have it. The urge of adolescence carries them away out of our detaining hands.—*Mrs. C. Gasquoine Hartley.*

\* \* \* \* \*

I believe that the reason why masturbation is so widespread an evil—amounting, I gather, although from the nature of the case no complete evidence can ever be accurately obtained, to somewhere *about 90 to 95 per cent of all boys at boarding-schools*—is because the boy leaves his home in the first instance without one word of warning from his parents—and thus falls into evil ways from his innocence and ignorance alone. This immorality is estimated by some at 80 per cent, by others at 90 per cent. Another says that not 10 per cent are innocent. Another that it has always begun at from eight to twelve years of age. Others that it is always worst amongst the elder boys. Others that “it is universal.” And yet there are people who deprecate purity-teaching for boys because they feel that a boy’s natural modesty is quite a sufficient protection, and that there is danger of destroying a boy’s innocence by putting ideas into his head. To hear such people talk, and to listen to the way in which they speak of self-abuse as though it implied monstrous moral perversion, one would think that the condition of morals when they were young was wholly different.—*Dr. Clement Dukes.*

\* \* \* \* \*

*Effect of Masturbation in Girls.*—Eulenburg considers that the comparative absence of bad effects from masturbation in girls is largely due to the fact that, unlike boys, they are not terrorized by exaggerated warnings and quack literature concerning the awful results of the practice. Forel, who has also remarked that women are often comparatively little troubled by qualms of conscience after masturbation, denies that this is due to a lower moral tone than men possess. Guttceit states, according to his observations, “masturbation, when not excessive, is, on the whole, a quite innocent matter, which exerts little or no permanent effects,” and adds that it never, in any case, leads to *hypochondria onanica* in women, because they have not been taught to expect bad results. W. C. Krauss says: “From my experience it (masturbation)

seems to have an opposite effect upon the two sexes, dulling the mental and making clumsy the physical exertions of the male, while in the female it quickens and excites the physical and psychical movements. The man is rendered hypoesthetic, the woman hyperesthetic.”—*Havelock Ellis*.

\* \* \* \* \*

During the teens, sex education must concern itself with many factors other than mere knowledge concerning reproduction. Facts now are likely to be far less interesting and vital than sensations. There should be no more talking of sex than is necessary to insure its complete understanding and to prove your readiness to help. For the rest, the youth's emotions should be directed into safe channels by means of healthful exercise and fun. Trashy novels feed sex desires; trashy movies are even more disturbing. Athletic contests, military drill, pageants and community drama, girl- and boy scout and campfire organizations, enough sleep, simple non-stimulating food, wholesome friendships; these are of fundamental importance in sex education during this difficult age.—*Dr. Mabel S. Ulrich*.

\* \* \* \* \*

*Change of Life in Men*.—To people not familiar with the subject it sounds rather strange to speak of “change of life” in men.

Man, possessing no menstrual function, cannot have any menopause, but still sexologists and psychologists who have studied the subject carefully are convinced that between the ages of forty-five and fifty-five men also undergo a certain change which may be spoken of as the change of life or the male climacteric.

They become irritable, capricious, very susceptible to feminine charms, are apt to fall in love, and in many the sexual instinct is greatly increased. As in women, this increase of the sexual desire is sometimes due to pathologic causes, such as an inflamed prostate gland—in other cases it is of psychic origin.

Just as a man should be particularly kind and considerate to his wife during her menopause, so the wife, understanding that her husband is going through a critical period, will also increase her tact, patience and consideration.—*Dr. William J. Robinson*.



Numberless are the jovial and contented husbands who have never suspected, and who will never know, that their wives carry about with them, sometimes with silent resentment, the ache of mysterious tabus. The feeling that there are delicious privacies and privileges which she has never been asked to take, or forced to accept, often erotically divorces a wife from her husband who never realizes what he has missed. The case of such husbands is all the harder because, for the most part, all they have done is the result of the morality that has been preached to them. They have been taught from boyhood to be strenuous and manly and clean-minded, to seek by all means to put out of their minds the thought of women or the longing for sensuous indulgence. They have acquired the notion that sexual indulgence and all that appertained to it is something low and degrading, at the worst a mere natural necessity, at the best a duty to be accomplished in a direct, honorable, and straightforward manner. No one seems to have told them that Love is an art, and that to gain real possession of a woman's soul and body is a task that requires the whole of a man's best skill and insight.—*Havelock Ellis*.

\* \* \* \* \*

*Pre-determination of Sex.*—On the question of the causes of production of the sexes at will. There is no want of hypotheses, assertions, nor even of experiments on this subject; but, we are obliged to admit that up to the present we know nothing certain. No one has yet succeeded in producing experimentally in animals males and females at will. According to one theory, which has created much impression, overfeeding produces females and underfeeding males. Although this appears to be true in certain cases among some animals, it is in no way proved in a positive manner.

It has also been suggested that selection produces the sex which is deficient in numbers; but here again proofs are wanting. It has been maintained that crossing tends to breed females, while consanguineous marriages produce males; in other words, that mongrel races show an excess of female births, while races in which marriages are very consanguineous, and polyandrous tribes show an excess of males. It is much better to leave this question alone till science has furnished us with conclusive proofs. Certain results obtained with the lower animals give hope that the future may shed some light on this point.—*Dr. August Forel*.

*The "Double Standard of Morality"* is the lie that protects the libertine and gives to him social standing, while it outlaws his sister, the prostitute. The lie also gives the syphilitic the right to enter a home of respectability and to marry a pure woman. The wife often finds out too late she has been married to a walking pest, a being who properly should be in a sanitarium or hospital or in isolation upon some island where he could not injure the innocent or assist in social distintegration. It is to be hoped under a system of sane education that the parents and young women of America will realize that a syphilitic husband makes a mighty poor parent, whether he be foreign duke or American millionaire. There is nothing quite so fine as good, red blood, free from disease. It maintains the home and sustains the state.—*"Social Hygiene vs. Sexual Plague."*

\* \* \* \* \*

*Any condition which changes the conformation of the prostatic urethra is likely to produce urinary obstruction. Inflammatory swelling—acute or chronic—tumors, stone, abscess and the enlargement of the prostate seen in more or less advanced life are attended by urinary obstruction of greater or less degree.*

The prostate is a sexual organ and normally should shrink or atrophy with old age. *Enlargement of the prostate, therefore, always is the result of disease, never of old age.* The sooner this is understood by the laity the sooner the foolish notion that "every old man has an enlarged prostate" will be corrected. Nature should not be made to bear an unfair share of the burden of blame for such conditions. *The man past middle life who begins rising at night to urinate should not deceive himself with the "old man" theory. He should consult his physician at once. Early attention may delay development of, or even cure, conditions which, if neglected, will inevitably lead to permanent prostatic enlargement.*—Dr. G. Frank Lydston.

\* \* \* \* \*

It is considered quite the proper thing to inform a young girl as to the truths of her nature when she approaches the menstrual period. Intelligent persons are convinced that such knowledge affords a valuable safeguard for the maiden in every way. But when a boy is approaching a parallel critical period in his life—the period of emissions and erotic (love) fancies—it is con-

sidered very bad form and "dangerous" to give him the slightest information. The lad is expected to stumble his way into knowledge, to suffer and to die, perhaps, from the venereal poisons. If moral and physiological instruction is good for the maid, why should it not be good for the youth? No wonder President David Starr Jordan of Leland Stanford University should remark sadly that probably one-third of the young men of today are maimed for life before they get a good start.—"*Social Hygiene vs. Sexual Plagues.*"

\* \* \* \* \*

*The Desire of Change in Man.*—A peculiarity of the sexual appetite in man, which is fatal for Society, is his desire for change. This desire is not only one of the principal causes of polygamy, but also of prostitution and other analogous organizations. It arises from the want of sexual attraction in what one is accustomed to and from the stronger excitation produced by all that is new; a phenomenon of which we have spoken above. On the average, woman has a hereditary disposition which is much more monogamous than man. The sexual appetite thus loses its intensity from the prolonged habit of connection with the same woman, but, becomes much more intense with other women, if not in all men at any rate in most. Such desires may generally be overcome by the aid of a true and noble love, and by sentiments of duty and fidelity toward the family and toward a respected wife. We cannot, however, deny that they exist, nor that they are the cause of the worst excesses, and the most violent scenes, often with a tragic result.—*Dr. August Forel.*

\* \* \* \* \*

There is probably no greater menace to the health and efficiency of the American people today than the venereal diseases. Tens of thousands of women are in a state of semi-invalidism because of gonorrhea contracted from husbands who thought themselves cured before marriage. Large numbers of babies are hopelessly blind from this disease. Uncounted numbers of women will never bear children because gonorrhea has made either the husband or wife sterile. Syphilis is causing insanity, paralysis, locomotor ataxia, and degenerative changes of the vital organs. No disease known to medical science has such a harmful effect on the offspring. *Gonorrhea and syphilis*



together, it is estimated, are costing the people of the United States approximately \$500,000,000 annually. Introduced into the marriage relation, these two diseases strike at the very foundation of the present social order. They impose a burden of physical and mental suffering upon humanity which has now become intolerable.—*Pennsylvania State Board of Health.*

\* \* \* \* \*

How many girls enter upon marriage quite ignorant and altogether inexperienced. They commit themselves to the keeping of a man of whom they know hardly anything at all. The parents are often satisfied with the most meager information. It is considered improper to ask for detailed information regarding the husband's past life, and hence it often happens that a girl is delivered up to an unscrupulous man suffering from venereal infection, simply because she has never been adequately informed regarding the serious step she is undertaking, regarding the completely new mode of life upon which she is so suddenly entering. We thus see that there are ample grounds for explaining to a girl in good time precisely what she will undertake in entering the married state.—*Dr. Albert Moll.*

\* \* \* \* \*

If boys are in need of sex instruction, then girls are much more in need of it. The first reason is because a misstep in a girl has much more disastrous consequences than it has in a boy. The disastrous results in a boy are only physical in character; the results of the *same* misstep in a girl may be physical, moral, social and economic. If a boy, through ignorance, rashly indulges in illicit sexual relations, the worst consequence to him may be infection with a venereal disease. He is not considered immoral, he is not despised, he is not ostracized, he does not lose his social standing in the slightest degree, and when he is cured of his venereal disease he has no difficulty in getting married. He does not even have to conceal his past sexual history from his wife. But if a girl makes a misstep the consequences to her are terrible indeed; it may not only cost her health and social standing, she may have to pay with her very life. She runs the risk of venereal infection the same as the boy does, but in addition runs the risk of becoming pregnant, which in our present social system is a catastrophe indeed.—*Dr. Wm. J. Robinson.*

By teaching chastity we not merely decrease the demand for prostitutes, but we greatly diminish the supply. Few girls, if any, take to the streets until they have been seduced; and the antecedents of seduction are the morbid exaggeration of the sexual appetite, the lack of self-control, and the selfish hedonism which youthful impurity engenders.

A young man allows lust or passion to lead him into seduction, he commits a crime the consequences of which are usually cruel in the extreme; for in most cases the seduced girl sinks of necessity into prostitution. So blind, so callous does impurity make even the refined and generous, that many a young man who can be a good son, a good brother, a noble friend, a patriotic citizen, will doom a girl whose only fault is that she is physically attractive—and possibly too affectionate and trusting—to torturing anxiety, to illness, to the horrible suffering of undesired travail, to disgrace, and in nineteen cases out of twenty to ostracism and the infamy of the streets. Murder is a small thing compared with this. Who would not rather that his daughter were killed in her innocence than that she should be doomed to such a fate?—*Dr. Mary Scharlieb.*

\* \* \* \* \*

*Venereal Prophylactics.*—The most efficient prophylactic against gonorrhea is protargol; the most efficient prophylactic against syphilis is calomel or mercuric chloride (corrosive sublimate). The protargol is used in the form of a 2 per cent solution or suspension; the calomel is used in the form of a 30 per cent ointment; the mercuric chloride in the form of a 3 to 1000 solution, the vehicle consisting of tragacanth, starch, glycerin, alcohol and water. The packet used by our army and navy consists of a collapsible conical shaped tube with a partition in the center; the conical half of the tube is filled with a 2 per cent protargol solution; squeezed out. The other half of the tube is filled with a 30 per cent calomel ointment; when wanted for use, the cap is removed, a portion of the ointment is expressed and the organ anointed. Both the protargol and the calomel ointment are used after intercourse.

Prophylactics are now prepared which contain *one* preparation both against gonorrhea and syphilis. They are more convenient to use.—*Dr. William J. Robinson.*

If you have read and believed "Onania," and the works of Tissot, Lallemand, Howe and Acton, as well as more recent books of sex instruction, like Stall's series, "Sexology," and the like, which have drawn their inspiration from the earlier ones mentioned, you will be led to believe that masturbation is the most disgusting and injurious practice and the most degrading vice and sin against morals and decency that ever has affected mankind.

If, on the other hand, you have read Näcke, Greisinger, Thiernach, Brill, Woodruff, and scores of other scientific investigators, you will find that any results from this practice, itself, are trivial, or entirely negligible. Rohleder, Ellis, Freud and Krafft-Ebing consider that the only harm that it does is sometimes to produce functional nervous disturbances. All modern scientific writers agree that neither epilepsy, insanity, feeble-mindedness, tuberculosis, nor, in short, any other diseases ever can be caused by masturbation alone.—*Dr. W. F. Robie.*

\* \* \* \* \*

In the etiology of impotence three main causes must be taken into consideration. Impotence is almost always met with in congenital or acquired malformation. Such anomalies lie more in the province of surgery. Impotence is also found as a symptom in certain constitutional diseases. The patients suffering from these troubles are seeking medical advice more for their causative anomaly than for the symptom of impotence, which in these cases is of secondary importance. Hence the consideration of these cases may also be omitted. The anomaly of impotence *par excellence* and for which medical advice is mostly sought is nervous impotence. This impotence from nervous collapse is the commonest and complicates all other kinds.

The patients of this class have always been normal in their sex-life. Suddenly, one day, they find themselves impotent. The cause of this kind of impotence is, in the majority of cases, sexual excesses, and four different kinds of excesses may be taken into consideration, excesses in copulation, in masturbation, in mental erethism, or commonly called day-dreaming, and finally excesses in tactile eroticism, or the common sexual dalliance or caresses of young lovers.—*Dr. Bernard S. Talmey.*



Self-treatment with simple or patent remedies will not cure venereal disease. It may cause the outward symptoms to disappear, but to cover up a disease is not to cure it.

The only safe and certain way to a complete cure of venereal disease is treatment by a competent physician or venereal clinic. Also, it is just as necessary to continue the treatment until rigid medical tests show a complete cure. Some of the most serious after-effects of venereal disease are due to stopping treatment too soon.

Self-treatment probably costs less in the beginning, but you are fighting a dangerous enemy, and the weapons must be chosen accordingly. The Allies, armed with pop-guns, could never have defeated Germany. Pop-guns cost less, but the most expensive things in the long run are those that do not give results, and the self-treatment of venereal disease *does not* give results.—U. S. Public Health Service.

\*   \*   \*   \*   \*

Parents and taxpayers should bear this in mind. Instruction in social hygiene is the cheapest, yet best paying investment that can be made by any community. *An ounce of disease prevention in the way of education is worth a pound of heavy taxation cure to take care of disease consequences.* One or two lectures during the term in the high schools will go far to post young men as to fundamental truths. It is desirable, though not strictly essential, that the instructor be a man of high moral character who by open life and manifestation of physical health, constitutes an example of the value of moral and physical restraint, thus arousing a spirit of emulation in young men. *Boys do not want to be preached at. They simply want to be told how to live in order that they may become successful and respected men.* There is no subject they are more deeply interested in than sex nature; they instinctively realize it to be the supreme thing in manhood. What a great wrong society does to them by denying the proper knowledge!—"Social Hygiene vs. Sexual Plagues."

\*   \*   \*   \*   \*

If the penalties meted out to the impure are so many, there is yet comfort for the unmarried man in those pages which show that perfect continence is quite compatible with perfect health, and thus a great load is at once lifted from the mind of him who wishes to be conscientious as well as virile and in health with all

the organs of the body performing their proper functions. There is an erroneous and widely spread belief that exercise of the sexual functions is necessary in order to maintain health. . . . The reproductive glands have been so constructed that their specific activities can be suspended for long periods of time without their atrophy or the slightest impairment of function. In this particular they resemble the inherent capabilities of a woman's breasts, which can remain quiescent for years and when called into demand physiologically respond with perfect function. *It is a pernicious pseudo-physiology which teaches that the exercise of the generative functions is necessary in order to maintain one's physical and mental vigor of manhood.*—Dr. James Foster Scott.

\* \* \* \* \*

*Ignorance Responsible for Disasters to Pure Womanhood.*—It has been learned that the gonococcus may sometimes remain in a quiescent state in the urethra for a considerable period—often for years; that the infected may suffer no immediate inconvenience; in fact, he or she may consider themselves free from the infection, but when this germ is transplanted to a fresh soil it may resume its malignancy. The fact that many unhappy wives have undergone severe or fatal surgical operations, places a seal of truth upon this statement. A majority of these wives were clean and virtuous women; they married men “who had gone the pace”; these men brought to their wives the “germ of debauchery,” in most cases unwittingly, only to learn, too late, they have ruined the woman of their choice.

In justice to the human race it must be maintained there are but few men, however immoral or debased, who would deliberately infect their wives. *It is ignorance—lamentable, fearful, widespread ignorance that is largely responsible for these disasters to pure womanhood—certainly not wilful intent.* Does not every principle of human justice, of real morality, call for decent public enlightenment?—*Indiana State Board of Health.*

\* \* \* \* \*

There is a disease which is born of sin, and which leads to grave results, although it is popularly believed to be a small matter, easily and quickly cured, and leaving no trace behind it. This disease (gonorrhea) sometimes lies behind the cemetery lot with only the graves of husband and wife. Children had been

desired, and it had been thought a mysterious Providence which withheld them. Investigation might have explained the matter in this way: The husband contracted this disease; he was apparently quickly cured, and supposed that to be the end of it; but the end was not yet. *He gave the disease to his pure and innocent wife, in whom, perhaps, it was never recognized at all; but it did its work—the inflammation which it caused thickened the walls of delicate tubes in the mechanism of reproduction; they were stopped up, and she became barren.—Dr. H. S. Pomeroy.*

\* \* \* \* \*

There is a special aspect of the problem of pre-marital chastity of men that young women should understand, and that is their indirect responsibility for the unchastity of many men. In discussing dancing and extreme dress, it has been indicated that women as a sex have a tremendous responsibility for the temptations of men. The same is true in the case of flirting or more extreme familiarities with men. However sure a young woman may feel of her own power of self-control, she should not consider lightly her possible part in a chain of events which may lead men to unchastity with other women. Many a man driven into the white heat of passion by thoughtless or deliberate acts of a pure girl has gone direct to seek relief of tension in the underworld. Of course, the girl in this case is not directly responsible for the downfall of the man; but I wonder if there is not moral, if not legal, responsibility for one who knowingly leads or helps another to the brink of a precipice from which he voluntarily falls.—*Prof. Maurice A. Bigelow.*

\* \* \* \* \*

It is painful to be obliged to speak of a practice, regrettably common among misguided young men, who, for the sake of the pleasurable sensations experienced, artificially arouse their generative organs to the acme of activity. This is variously known as self-abuse, self-pollution, masturbation, and Onanism. To the normal mind this habit is so grossly offensive as to excite intense disgust. From the hygienic point of view, it is at best a reckless and unjustifiable waste of precious energy; at worst it may cause physical and mental wreck. On this matter, however, it is *very important* that I be not misunderstood. *It is undoubtedly true that the habit may continue years without producing noticeable*



*deterioration of health*, but, even in these cases of apparent exemption from serious consequences, there is likely to be established such a perversion of the generative nature as to unfit the sufferer for the sexual functions that should find their fullest and most valuable expression in the relations of the marital state. *In general, the health is not ruined, as is alleged in the quack advertisements that deface and disgrace some journals that are allowed to enter our homes, but the fact remains that the practice is low, filthy, bestial, and degrading. Whatever may be said in depreciation of self-pollution, it immediately injures only the person who practices it, and by so much is less evil than a method of sensual gratification that involves another. The solitary vice being vice, is bad, but the social evil is vastly more vicious.—Dr. F. H. Gerrish.*

\* \* \* \* \*

Education undertakes the task of repressing the girl's sensuality until the time of betrothal. It not only forbids sexual relations and sets a high premium on innocence, but it also withdraws the ripening womanly individuality from temptation, maintaining a state of ignorance concerning the practical side of the part she is intended to play in life, and enduring no stirring of love which cannot lead to marriage. The result is that when she is suddenly permitted to fall in love by the authority of her elders, the girl cannot bring her psychic disposition to bear, and goes into marriage uncertain of her own feelings. As a consequence of this artificial retardation of the function of love she brings nothing but deception to the husband who has set all her desires upon her, and manifests frigidity in her physical relations with him.—*Dr. Sigmund Freud.*

\* \* \* \* \*

There is one cemetery lot which makes my heart sick—it is the one with a long row of infant graves. The devout lay observer is wont to exclaim: "What a mysterious Providence!" It certainly is both mysterious and providential—mysterious how the parents could have been guilty of bringing those infants into the world, and providential that the morbid, weakly things were removed soon and not allowed to cumber the earth, a weariness to themselves and others. And there is another mystery about it—that the parents were willing thus to advertise their weakness

and their sin. It had been better to have let the kindly hand of time level the dishonoring little mounds of earth, and to have put the chronicle, if anywhere, on the least conspicuous place on the family monument. One, two, even three infant graves may call for sympathy for the bereaved parents; but when the number reaches a half dozen or more, sympathy often may well be swallowed up in pity and its near of kin, contempt! *Behind this row of tiny graves there usually lies a loathsome disease (syphilis) which might have remained a secret had not heredity published it to the world.*—Dr. H. S. Pomeroy.

\* \* \* \* \*

Trainers of pugilists and of men who are entering for athletic contests are well aware of the effect sexual intercourse exerts upon the physical and mental condition of every man, and coitus is the one thing which is rigidly excluded, and about which the strictest laws are held. An ex-pugilist has told me that when he was training for a fight, at the beginning, he suffered a great deal from want of intercourse, his seminal losses were frequent, and he had large and repeated pollutions, but in a short time, as soon as he got thoroughly into his work, these entirely disappeared and indeed he thought no more about them; but as soon as his work was finished and the fight was over he found that sexually he was as good as ever, the libido was pronounced, and I am satisfied, not only from this man's experience but of others with whom I have talked, that in such cases there is no loss of power from sexual abstinence, provided always the patient is not keeping his genital organs continually irritated by dallying with women, by reading, talking, or thinking about matters connected with sexual intercourse.—Dr. Frederick R. Sturgis.

\* \* \* \* \*

In the beginning of married life the principle commended to the husband should be that an alarmed and reluctant bride should be patiently wooed and never ravished. The delicacy of caution and restraint is of great importance, especially at this juncture which marks the outset of connubial relations. The entire change of life at this period exerts a strong influence upon the physical condition of the young bride. She needs time and rest to get used to the new condition of things and to reconcile it to her

ethical views. If these matters are not respected by the husband, the death-blow to the young love is already dealt in the first days of married life.

There is, furthermore, always more or less suffering on the part of the bride in the first congress, partly due to the rupture of the hymen and partly to the forcible dilatation of the vagina. These pains are not confined only to the time of the act, but continue day and night, and represent a really diseased condition. Hence sufficient time should be allowed after defloration for Nature to repair these injuries. Frequent indulgence at this period of married life is a prolific source of inflammatory diseases and occasions ill health.—*Dr. Bernard S. Talmey.*

\* \* \* \* \*

She who obtains a miscarriage in the earlier months of pregnancy feels comparatively virtuous, because she draws the line at "quickenings." This is moral jugglery and ethical hair-splitting. What evidence is there of soul at five months which may not be found at four? True, the unborn child of the latter age does not appear to move its legs and arms, while the other usually does. Is the spirit situated in the extremities, or is the movement of a muscle evidence of a soul? Considered from the lower plane of physical life only, what reason is there for the distinction? There has been *life* from the first; there is no *independent life* until birth. Is it reasonable to suppose that the Creator, who has been steadily at work for four months and fifteen days on one of the most delicate and complicated pieces in His whole laboratory, and has made no mistake thus far—the work being absolutely perfect as far as carried—considers it of little or no consequence today, but of the utmost importance and value when it shall have been in His hands a few hours longer? Our laws visit the death penalty on the wilful destruction of post-natal human life; would that they might inflict the same penalty for the wilful destruction of pre-natal human life *of whatever age!*—*Dr. H. S. Pomeroy.*

\* \* \* \* \*

Tell your girl about menstruation as soon as her figure begins to show signs of change. Make her understand that this is a normal function; that she will have no pain and practically no discomfort if her body is healthy, her muscles firm and well developed, her blood and digestion as they should be. Explain to her



that crowding of the system with sweets, lack of daily exercise and baths, slinking shoulders and crooked backbone are far more responsible for girls' pains and depressions during this time than any diseased condition of the reproductive system itself.

Teach her the duty of health; that since the life-stream must pass through the bodies of women, she owes this duty, not only to herself, but to the race; and then help her to do her part.

At about this time your girl will begin to take a new interest in boys and in her clothes, less in games and activities. Be sympathetic, but try to encourage group fun rather than pairings, *doing* rather than day-dreaming.

Teach her the meaning and reason for good manners and true conventions. Good manners alone have saved thousands of girls from unfortunate situations. Know her friends; don't let her stay all night with other girls; know (don't guess) where she is when not in school; don't nag her.—*Dr. Mabel S. Ulrich.*

\* \* \* \* \*

*The Sexual Dangers of the Bible.*—In the Bible sexual processes are repeatedly mentioned. In the mind of the child a conflict inevitably arises when, on the one hand, he finds that everything of a sexual nature is diligently concealed from him, and, on the other, in the Holy Book, which is put before him as the basis of his moral instruction, he finds that so much attention is paid to sexual things. It is not the actual accounts of sexual things in the Bible which constitute the danger, but the contrast between the plain speaking of the Bible in these matters, and the general affectation of secrecy outside its pages. An additional point of importance is the fact that in the Bible sexual topics are handled in a way which is by no means always delicate. I may recall the frequency with which the idea of the *whore* is employed for purposes of comparison; and I may refer also to the occasional use of strongly erotic language, as, for example, in the Song of Solomon. A further danger lies in the fact that the Bible contains descriptions of customs which are no longer in harmony with modern ideas; it suffices to mention the accounts of polygamy in the Old Testament. Unless the distinction between what is historical and what is truly religious is carefully explained to the child the latter's moral ideas will very readily become confused.—*Dr. Alfred Moll.*

*The "Lost Manhood" Quack.*—For years "quack" doctors and "medical" institutes have made capital out of the ignorance of men concerning facts about their reproductive organs. In many cities these unscrupulous men advertise to cure "lost manhood," "nervous debility," "pimples," and other things which have nothing to do with sexual health. They try to frighten people into paying large sums for the cure of "diseases" that do not exist, and scare boys into thinking the normal experiences of growing manhood are indications of sexual disorders. They are more interested in a patient's money than his health. A good doctor never advertises; he waits until a man comes to him.

Many boys are bothered by pimples on the body when they reach the age of about fifteen, sixteen or seventeen. These are not an indication of any sexual disorder whatsoever, and they need cause no worry. If they become especially unpleasant the family physician should be consulted.

Men suffering from any sex disease should beware of these same "medical institutes" and advertising quacks. Patent medicines and "favorite prescriptions" are dangerous. Every case needs individual attention and the care of an absolutely reliable physician.—*United States Public Health Service.*

\* \* \* \* \*

From a legal point of view, several late occurrences are of great interest:

In Oklahoma a man received a penitentiary sentence of five years for infecting a girl with syphilis.

Not far off, in Nebraska, a doctor warned a hotel-keeper one of his patients who had syphilis was a guest at the hotel, and, as he refused treatment, was a menace to the other patrons of the hotel. The doctor was sued for violating professional confidence, but was upheld by the courts.

The most important decision, however, was in North Carolina. Here the Supreme Court affirmed a decision of a lower one which awarded damages of \$10,000 to a wife against the husband for infecting her with venereal disease. Part of the final ruling was to the following effect: The true ground for the exemption, at common law, of the husband from liability to the wife for his torts was because by marriage she became his chattel. All the conditions and customs of life have changed. Many laws become

obsolete, even when not changed by statute and the constitution, as this has been; and no principle of justice can maintain the proposition in law, or in morals, that a debauchee, as the defendant admitted himself to be, can marry a virtuous girl, and, continuing his round of dissipation, keep up his intercourse with lewd women, contracting, as he admitted, venereal disease, communicate it to his wife, as the jury found, subjecting her to humiliation, and ruining her physically for life, and seeking to run off with all his property, abandoning her to utter indigence; yet be exempted from all liability by the assertion that he and his wife are one, and that he being that one, he owes no duty of making reparation to her for the gross wrong that he has done.

\*   \*   \*   \*   \*

The social diseases, shielded by what has been termed the "Anglo-Saxon sense of prudery," are doing enormous damage to the race. The lack of correct information among the masses of the people as to their extent and danger, constitutes one of the most menacing problems of American civilization. *Has not the time come for parents, and in fact for all thoughtful citizens, to abandon the false delicacy, the prudery, which, by surrounding sex nature with absurd mystery, invites the destruction of national health?* Young men are taught in school the physiology of the brain, heart, lungs, stomach, and other vital organs. Why should such instruction cease when it comes to the most important function of the body—that of reproduction on which depends the perpetuation of the species? The health of the reproductive organs also has an important effect on the other organs of the individual. Is it not social stupidity to insist on the education of young men in arithmetic, geography, grammar, and in other branches which fit them for business life, and at the same time deny them proper knowledge of a function, the impairment of which constitutes a most destructive assault upon their physical and mental capacity and unfits them for success?—*Social Hygiene vs. Social Plagues.*

\*   \*   \*   \*   \*

*The Evils of Masturbation Are Greatly Exaggerated.*—It is wrong to terrify the mind of youth with the formidable insanity specter. While the practice is admitted to be weakening and debasing, and while physicians understand that the youth who wisely



refrains or keeps the practice under control makes the better balanced man in maturity, yet exact knowledge asserts that masturbation is rarely the specific cause of insanity. The popular impression that the practice is the frequent cause of mental overthrow is based on the observation that many insane people practice the vice. Those who make a scientific study of the insane have learned that perhaps the larger percentage of demented persons owe their condition to delinquency at birth. Frequently they are the offspring of underfed, overworked or alcoholized and often venerealized parents. Lacking in physical and mental stamina at birth, the delinquent has not sufficient moral strength to resist temptation to self-abuse, which may hasten but is not the primary cause of insanity. *Admonition as to the evils of masturbation is not the most important thing in sex-education. The important thing is to teach young men the physiologic truths of their own natures.* The question of self-abuse is quickly disposed of under such instruction, since science teaches the practice is not necessary, can largely be restrained, and gives the reasons WHY. Science presents the possibility of a sensible, well regulated young manhood that constitutes an infinitely more invigorating and noble animus for right conduct than the detestable threat of the madhouse with its hateful and unnecessary mental anguish.—*Indiana State Board of Health.*

\* \* \* \* \*

While we refuse to excuse men who allow the sexual suggestiveness of women's dress to overcome their self-control, we should at the same time recognize that women have themselves to blame for much of the existing situation. I believe it is true that the average woman does not understand how dress that makes unusual exposure of the body may make a sexual appeal to men; but there is no such innocence on the part of the demi-mondes by whom many of the most dangerous styles are introduced. Perhaps women of intelligence and good standing may some day come to realize their responsibility for wearing clothing that means unusual temptation for men. However, this seems Utopian in these years when even women of the best groups are wearing equivocal dress; and so men must learn to fight their own battles against natural instincts stirred to greater intensity by dress invented to increase the trade of the women of the underworld.—*Prof. Maurice A. Bigelow.*

No man waits upon another's wife, provides her with carriages and cut flowers, opera tickets and wine suppers with never a suspicion of sex, and no maid who values her virtue will receive marked attentions from a married man. When a virgin finds an "affinity" she should steer it against a marriage contract at the earliest possible moment; when a wife discovers one to whom she is not wedded she should employ a bread and water diet to subdue her "natural super-naturalism" and reinforce her religion with a season of penitence and prayer.

The proper study of mankind is man; and we can obtain no true idea of the animal if we view him only in holiday attire. As despite all "progress of science," incubators and other labor-saving machinery, people still persist in entering the world in the primogenital way, the relation of the sexes is of quite immeasurable importance, and knowledge thereof should not be monopolized by the narrow circle who read medical magazines. It is well that we come occasionally out of the cloud-realm of sentiment and discuss the relations of man and woman from the standpoint of practical common sense.—*Brann—The Iconoclast.*

\* \* \* \* \*

Inside the body, near the bladder, are two glands, called the seminal vesicles. When a youth reaches the age of fifteen, sixteen or seventeen (though it may be earlier or later), these glands become filled with a fluid which is occasionally discharged in the night. This discharge is called a seminal or nocturnal emission. It is a perfectly normal experience. It may come two, three or four times a month, or only once in two or three months. It is well not to lie on the back when sleeping, and well not to drink much water late in the evening. Lying on the back brings the bladder directly over the seminal vesicles. If the bladder is full, it may cause an irritation of the vesicles, with too frequent emissions as a result. If a boy or man permits himself to get into a state of continued sexual excitement by continually thinking of sexual matters, these experiences may happen so often as to be weakening. If he keeps himself clean in mind and body; however, and feels no ill effects from emissions, he need not and should not worry.

Knowing these facts, the young man will not permit himself to become the victim of quack doctors. In many cities unscrupu-

lous men advertise to cure "lost manhood," "nervous debility," "pimples," and other things which have nothing to do with sexual health. They try to frighten the ignorant into paying large sums of money for the "cure" of diseases which do not exist. Many boys are bothered by pimples on the body when they reach the age of about fifteen, sixteen or seventeen. These are *not* an indication of any sexual disorder whatsoever, and they need cause no worry.—*Vermont State Board of Health.*

\* \* \* \* \*

*Sex and Health.*—Health and endurance depend largely on healthy sex organs. Until recently there has been silence and secrecy in matters of sex, so that women and girls have not known the close connection between the proper care and use of the sex organs and general health, and the connection between their own health and the health of future generations.

*Sex is one of the most fundamental things in life.* It is that which makes a man a man, and a woman a woman.

The change from girlhood into womanhood comes with the "waking up" and growth of her sex organs, and at this time a secretion begins to develop in the ovaries which is carried through her body, and adds to her strength and brain power. The outward sign of this growth is the beginning of menstruation, or the monthly flow of blood. From this time on the girl changes gradually from the awkwardness of her early teens into the graceful, attractive period of young womanhood.

The growth of a boy into a young man at about the age of fourteen is due to the growth and changes in his sex organs. His sex glands also secrete an exceedingly important substance which is absorbed into his blood. The blood carries this substance or secretion all through his body, into his muscles and into his brain. It gives tone to his muscles, power to his brain, and strength to his nerves.

It is sex, therefore, which makes possible the attainment of manhood and womanhood.

And sex is the means of creating Life itself. "The most fundamental thing in the world around us is life; the most fundamental thing in the spiritual life to which we aspire is love. The beginnings of life and the beginnings of love are in sex."—*United States Public Health Service.*



*The Sex Instinct and Love.*—Sex is the basis of the renewal of life. It is also the most fundamental thing in love. *Love is often used as the word to describe the strong attraction between men and women. This attraction is due, in large part, to the sex instinct.*

Sex underlies also the love of mother and child, of husband and wife—even friendship, to a great extent, is an outgrowth of sex.

The sex instinct is as normal, natural and necessary an instinct as self-protection. Just as the feeling of hunger for food has been given us that we may know when to eat and thus preserve life, so the sex instinct has been given us in order that we may create life.

Like any other instinct, it is evil only when it is misdirected and uncontrolled. One way in which human life differs from animal life is that men and women have the power to choose how they shall use the sex instinct. Its highest and finest possibilities can be reached only by directing it toward the building up of a home and of a family.

Marriage has been accepted after centuries of experience as the best method of carrying on life, both for the individual and for the race. A man or woman who acts in a way which may bring children into the world without provision for a respectable home or proper care, performs a cowardly act. Such a man or woman is called immoral by the public.

If moreover, the sex impulse is used selfishly for the sake of physical pleasure, for any other selfish gain, or even to give pleasure to another, the opportunity for the highest and finest love in life is lost.—*United States Public Health Service.*

\* \* \* \* \*

Woman is the object of the sexual instinct. The sexual instinct is the unavailing protest against death. Spiritualize Love as you may, the sexual instinct is the one great motive. Fancy is a fangle to disguise the fact. We wish to propagate because we know we must die. We love woman. The instinct operating in us endears her to our minds with the sanctity of our vain hope against the inevitable. She takes on appearances given her by our desire to heighten our desire. The something from without the world that we call Beauty transfigures her. She is the abyss

that calls to us to lose ourselves in it. The last want of love is away beyond mere possession; it is a wish to be absorbed in the personality of the beloved. This is but a showing of the craving for annihilation of individuality. The very dread of death therefore makes us seek it. What a maze!—*Brann—The Iconoclast.*

\* \* \* \* \*

Do not tell the children the ancient falsehood that insanity will surely result from handling the sexual organs. It is true that masturbation is a common habit of certain types of insane people and of some neurotics; but it is probable that the habit is more often one of several factors rather than the direct cause of the nervous breakdown. However, it is scientific to say that the habit may weaken the nervous system and indirectly affect general health, especially in pre-adolescent and early adolescent years. Probably the greatest nervous damage comes because there is often greater excess than is possible in natural sexual relations; the strain of all sexual excess is more in loss of nervous energy than of secretions. The safest advice one can give children is that the doctors agree that unnecessary touching of sexual organs has interfered with the health of many children and that those who avoid this are most likely to grow up strong in body and mind. This is the truth and practically the whole of the known truth that might have influence with young people.—*Prof. Maurice A. Bigelow.*

\* \* \* \* \*

It is generally agreed that the lack of sexual harmony in so many marriages has usually a dual cause (due in each case to ignorance or misinformation of long standing). First, the husband, in his conjugal advances, is too abrupt and inconsiderate of his mate's delicate balanced sexual nature, and fails to pave the way with the preliminary wooing which in all the higher forms of animal life, including man, is the natural forerunner of conjugation. Or he may show amorous insistence during that portion of the monthly cycle when his wife's sexual vitality is at a low ebb, when intercourse is physically undesirable and psychically repugnant to her. The second, and closely allied cause of discord, is the frequent coolness or virtual revulsion on the part of the wife to the sex act; this condition being due to the teaching of an irrational asceticism, or a false outlook on the whole

subject of sex, resulting in the marital relations to an artificial frigidity. It might be said, however, that this attitude, when not due to constitutional causes, can be usually overcome or alleviated by the tactful attentions of a considerate husband, who understands the psychology of the sexual embrace.—*British Medical Journal*.

\*   \*   \*   \*   \*

*The Dangerous Quack.*—The prevalence of the robbing and injurious quacks has been due entirely to the silence and prohibitory action of the medical societies. Yes! silence, denials, ignorance and apathy on the part of the physicians have aided and protected the quacks in their wholesale destruction of health and morals. Fines, imprisonment of a few out of hundreds and thousands, have not aided in letting the public know the facts. Publicity in homes, schools and press would long ago have sent these tricksters and swindlers to cover. The press has always been willing, but without the strong help and support of the medical men it was helpless. The few physicians willing and capable have been held back through fear of professional ostracism—the attitude of the priests of the Middle Ages.

*But just how is one to know who is and who is not a charlatan, a quack, a lying injurer? By understanding something of the sexual self, of the causes of sex disturbances and their many manifestations, of impotence true and false, of the fact that no reputable physician ever promises to make an absolute cure.*—*Dr. Wm. Lee Howard*.

\*   \*   \*   \*   \*

Most boys and young men receive no information whatever concerning sexual matters from their fathers, or other honest, friendly counselors. Fathers, however careful and conscientious in the instruction of their sons in all other matters, shirk this duty because it is a delicate and unpleasant task. Because of this ignorance, young men become the easy dupes of the numerous confidence operators who in paid advertisements style themselves “specialists,” etc., and profess to be skilled in the treatment of “nervous debility,” “lost manhood,” “varicocoele,” etc. These men know that most boys have practised or learned something about self-abuse; that all young men have nocturnal emissions; that few young men consult their fathers about these matters; hence boys



and youths swallow as truth the stuff which the "specialist" cunningly prints.

Probably half the young men in the country have been at some time secretly terrified by reading in such advertisements that nocturnal seminal emissions are evidences of grave disease of the sexual organs which will surely result in insanity, "loss of manhood," etc., unless the frightened youth employs the marvelous skill of the advertiser. And the ignorant boy, being ashamed or afraid to consult his father about the matter, falls into the trap.

Reputable clergymen, lawyers, and physicians never solicit business by advertising; beware of the doctor who does so. The young man should seek medical advice from his family physician whom he can safely trust as honest adviser and confidential friend. A few words of sound medical advice often save a young man months of secret, needless alarm, as well as considerable money.—*Vermont State Board of Health.*

\* \* \* \* \*

With our domestic animals we exercise the greatest care, we apply all the knowledge with which Science has provided us, to prevent the production of weaklings or degenerates. But the civilized human community does its best to protect and preserve its weaklings. This is quite as it should be; but, at the same time, we must do our utmost to prevent the weakling from affecting the race.

But it is not the congenitally diseased, or those who have acquired a transmissible disease, who constitute all the danger to the race. It is evident that to produce the strong and healthy we, the progenitors of future generations, must likewise be strong and healthy. And to this end we must apply our intelligence. If unhealthy conditions exist, we must not seek to propagate until these be removed; and if we cannot remove them, then we must deny ourselves the exercise of Life's supreme function.

When people have become enlightened enough to see in the Sexual Act something that is *not* the mere gratification of an appetite, it will be seen that the discussion of sexual matters is no more indelicate than the discussion of matters pertaining to any other of life's functions; and it will then be seen how indelicate are the people who try to conceal such matters from the light of day.—*Dr. H. R. Murray.*

*Consanguineous Marriages.*—There is a general opinion that marriages between blood relations, even when the contracting parties are presumably in perfect health, are often sterile, or, if not, the children born of such unions are usually endowed with insufficient vitality, malformed, predisposed to disease, or otherwise physically or mentally defective. The question has aroused much interest, and the result of exhaustive investigation, though inconclusive, would seem to indicate that consanguineous marriage is not *per se* injurious to the offspring, but that the danger of procreation among blood relations lies in the hereditary transmissibility of certain predispositions to disease; and, generally speaking, it is advisable that blood relations should not marry, even though they appear to be absolutely free from hereditary taint, because it must be borne in mind that there is always the possibility that two similar predispositions to disease, or degenerate tendencies, which on account of their slight intensity are not recognizable in the parents, may combine in the offspring and become so pronounced as to assume a definite abnormal character.

It should be mentioned in this connection that there is, undoubtedly, an unfavorable element in the marriage of two individuals who spring from two races too wide apart.—*Dr. A. A. Philip.*

\*   \*   \*   \*   \*

After suffering for years many married women become feeble, wornout, nervous wrecks; their lives are a burden. The operating table is their only hope, and they leave it deformed, mutilated and sexless.

Women should protest against the so-called "medical secret" which decrees that they be kept in ignorance where their health, as well as life, is directly concerned. That there are men in the medical profession in this country, as well as in Europe, who have openly protested against respecting the secret where another life is involved seems a cheerful signal of a general social awakening in this field.

If women voluntarily exposed themselves to diseases which would sap the husband's vitality, making him a dependent invalid, or expose him to the shock of a mutilating operation, or death—would men continue to suffer? Would they allow the medical secret to protect women in this alleged "Freedom?"

Every girl knows he would neither protect her nor continue to suffer. It is women only who have allowed the double standard of morals to stand so long, giving men the purest and best of their womanhood, but not demanding the same from them. As soon as women realize the danger to themselves and their children which they are likely to incur from men who have lived promiscuously, they will revolt against such standards.—*Mrs. Margaret H. Sanger.*

\* \* \* \* \*

*Who Should Discuss the Sexual Continence Question?*—In order to reach a proper solution of the sexual continence question, we must eliminate from the discussion certain classes of people. We must eliminate the man who is so old that he no longer remembers that he ever was young; we must eliminate the impotent or pervert, who never experienced any normal desire; we must eliminate the bigoted theologian and the narrow-minded moralist, who consider extra-marital intercourse a *crime*, about on a par with burglary or murder; we must eliminate—this by all means—the asexualized old maid, who has no conception of the power of the libido in normal man (or in normal woman, for that matter); and—last but not least—we must also eliminate the debauchee who puts an absurdly exaggerated value on the sexual function, and who believes that life without sexual gratification is not worth living.

In short, the question should be discussed by normal, healthy, free thinking, scientific men, ranging in age between thirty and fifty. They may be older, provided they have good memories.

Only then will we have an *honest* and scientifically *valuable* answer to this tremendously important question: The existence or non-existence of the sexual “necessity.”—*Dr. William J. Robinson.*

\* \* \* \* \*

*Infecting the Innocent.*—The conditions created by the marriage relation render the wife a helpless and unresisting victim. The matrimonial bond is a chain which binds and fetters the woman completely, making her the passive recipient of the germs of any sexual disease her husband may harbor. On her wedding night she may, and often does, receive unsuspectingly the poison of a disease which may seriously affect her health and kill her children, or, by extinguishing her capacity for conception, may



sweep away all the most cherished hopes and aspirations of married life. She is an innocent in every sense of the word. She is incapable of foreseeing, powerless to prevent this injury. She often pays with her life for her blind confidence in the man who ignorantly or carelessly passes over to her a disease which he has received from a prostitute. The victims are for the most part young and virtuous women—idolized daughters, the very flower of womankind.

It would be hard to name a crime so dastardly as for a man deliberately to defile and poison the body of the clean, sweet girl who loves and marries him; deliberately to inflict upon his children a foul disease—deformity, idiocy, premature death. Yet this is done, with a frequency which has at length aroused our best physicians to the struggle for public enlightenment and protection.—*Rev. Orison Swett Marsden.*

\* \* \* \* \*

*The Masturbator's Face.*—Many boys and young men are afraid that masturbation can be recognized on their face and in their general demeanor. This is foolish. There is no such a thing as “a masturbator’s face”; pimples are no sign of masturbation, and on the other hand a non-masturbating boy may be exceedingly shy, bashful and retiring. Nobody can recognize by your face that you have been masturbating, and do not make hasty conclusions in judging others.

*I am laying emphasis on this point because, in my opinion, there are few beliefs that have caused greater mischief than the erroneous idea that there are unmistakable tell-tale marks by which we can know positively whether or not a person is a masturbator.* Of course, if a boy or young man masturbates to excess, he may become anemic and his face get a pale, dingy look, with rings around the eyes, etc. But these facial characteristics do not differ in any way from those produced by many other diseases. A bad stomach, insomnia from any cause, a congested prostate, piles, and so on, may produce the same facial appearance. It is peculiar that a person may look the picture of health, but having heard or read that masturbation may be diagnosed by merely looking at one’s face, he will begin to imagine that this is the case with him, and that everybody knows that he was addicted to the habit.—*Dr. William J. Robinson.*

*Ignorance and Venereal Disease.*—Venereal diseases have ruined nations, crippled millions of people, their baneful effects have been passed on from generation to generation. Crime, insanity, viciousness and defectives have been our inheritances and man has been thinking and saying, "It is the way of the world—it is man's punishment for the original sin," and stupidly let it go at that.

Such an attitude no longer prevails. We are insisting that the diseased ones should not marry nor propagate. What the Church and Society, even up to five years ago, constantly ignored or accepted as a subject never to preach or talk about is now commonly discussed and explained, with the purpose and determination of bringing about better social health and moral conditions.

*To get rid of evil you must face it. To win battles you must go to the front. To understand the hidden forces in man which have been the causes for so much of the past sexual excesses and accompanying mental and nervous troubles we must face their trenches and dig them out.*

Make no mistake: The sexual instincts and forces cannot be separated from the other primal instincts and forces, functions or impulses.—*Dr. Wm. Lee Howard.*

\* \* \* \* \*

Marriage has been too thoughtlessly recommended as a cure for masturbation, for pollutions, for spermatorrhea, even for a lack of libido and for homosexuality. This was due to the general ignorance of the profession in matters sexual. Let us hope that all those who study this book will be more careful in the future, and will not dispense the matrimonial advice thoughtlessly and indiscriminately.

If I write on this subject so frequently and so emphatically, it is because I know the inside histories of too many unhappy homes. "Get married." And he gets married and he finds either that he is unable to perform the sexual act at all, or if he performs it, that it does not satisfy him. And he curses the physician for his advice. And I state it as my positive opinion that the ignorance of our profession of the physiology, pathology and psychology of the sex instinct, and the careless, thoughtless counsel so often given without any consideration of the possible

consequences, is responsible *more than anything else* for the contempt in which the medical profession is held by a large number of the laity, and for the alarming antagonism to it in many quarters. Thoughtless advice to a confirmed masturbator or to an impotent to get married may result in the *life-long* unhappiness of two individuals.—*Dr. William J. Robinson.*

\*   \*   \*   \*   \*

It is especially hard to understand how any medical men could recommend to a young man to resort to illicit relations for health and to jeopardize his own health and that of his future family. If it is justified to recommend illicit relations to a young man, as a cure for masturbation and its resulting neurasthenia, instead of explaining to him that a healthy hygiene and the exercise of his will-power will make easy the control of the desire without any loss of health, then why not recommend the same remedy to young women? Continence is no more injurious to the man than to the woman. The conventional view that incontinence in men is a necessary condition of health must be corrected. Instead of the popular fallacy that a young man is physically the worse for a clean moral life, the entire weight of evidence of the world's foremost medical scholars is unreservedly of the opinion that he is physically better for it. It is recognized by the highest authorities that continence is perfectly compatible with the most perfect health. Chastity properly understood is health, it never does any harm to mind or body. It is the consensus of the opinions of most of the great medical thinkers that it is not prejudicial to the health of a man to keep his body clean until he has found a true mate in life.—*Dr. Bernard S. Talmey.*

\*   \*   \*   \*   \*

The testimony of expert witnesses with regard to the influence of masturbation in producing other forms of psychoses and neuroses is becoming equally decisive; and here, also, the traditions of Tissot are being slowly effaced. "I have not, in the whole of my practice," wrote West, forty years ago, "out of a large experience among children and women, seen convulsions, epilepsy, or idiocy *induced* by masturbation in any child of either sex. Neither have I seen any instance in which hysteria, epilepsy, or insanity in women after puberty was *due* to masturbation, as its efficient cause." Gowers speaks somewhat less positively, but



regards masturbation as not so much a cause of true epilepsy as of atypical attacks, sometimes of a character intermediate between the hysteroid and the epileptoid form; this relationship he has frequently seen in boys. Leyden, among the causes of diseases of the spinal cord, does not include any form of sexual excess. "In moderation," Erb remarks, "masturbation is not more dangerous to the spinal cord than natural coitus, and has no bad effects"; it makes no difference, Erb considers, whether the orgasm is effected normally or in solitude. This is also the opinion of Toulouse, of Fürbringer, and of Curschmann, as at an earlier period it was of Roubaud.—*Havelock Ellis*.

\* \* \* \* \*

*Long Engagements.*—There are men who for personal reasons—long engagements, for example—know the necessity of being continent. Many honorable men in this position have a hard fight with their surging impulses, and close communion with the loved one does not help matters. Secretions occur which set up local inflammation of the glands in the groin, the sexual centers in the brain are kept active and in time there is a feeling of general relaxation.

If this state is long continued harm is done to the generative system. Nature is being aborted in her desires, and in time local congestion as well as nervous irritation follows.

This is the reason physicians advise against long engagements, where the man and maid frequently meet alone. This is the real reason why English and Continental girls—in fact, girls in all countries except the United States—are not permitted to be freely alone with their future husbands, and why marriages are expected to follow soon after the betrothal, for the effect of caresses and contact often does more harm to the sensitive and passionate girl than to the man. Many an American girl has gone to her nuptial bed completely used up in her nervous force and self-control through months of sexual excitement and imaginations.—*Dr. Wm. Lee Howard*.

\* \* \* \* \*

Personal experience with thousands of men and hundreds of women who have been the victims of *coitus interruptus*, *coitus incompletus* or *coitus prolongatus* entitles me to speak with authority on the subject. It is hard to determine who, the man

or the woman, is more seriously, more extensively injured by the practice; but my own impression is that it is the man. While, as a result of the practice, both may become afflicted with a lack of libido, or even a distate and loathing of sex relations, fast heart, neurasthenia, etc., there is one condition which may and often does affect the man, but from which the woman remains free, and that is: inability to copulate. Atony and congestion of the prostate are also conditions from which the man alone suffers.

As to absorption of the semen by the female genitals, no scientific proof exists of any absorption by the vaginal epithelium; there can be no question there is some likelihood of absorption by the epithelium of the lining membrane of the uterus. But even here scientific proof is still lacking. The absorption of one's own internal secretions is not an analogous case: Here the secretion is poured directly into one's own blood or lymph stream. But it is a fact that many women suffer intensely when in their sex relations they are deprived of the semen, either through the practice of *coitus interruptus* or through the use of a condom.—*Dr. William J. Robinson.*

\* \* \* \* \*

*Commercialization of the Sex Impulse* extends to other fields than those of alcoholism and prostitution. The filthy picture industry and other grossly indecent activities still thrive. Less flagrantly but still regrettably, the moving picture theatre, the legitimate stage, books, and clothes, all reflect the eagerness to coin sex curiosity and sex desire into cash. While it is scarcely necessary to be Comstockian in repression of every aspect of the nude, there can be no escape from the fact that the vogue of "leg shows," suggestive gesture and dancing, risqué plays and peek-a-boo garments is inspired by something more than a return to appreciation of the Grecian in art. It perceptibly raises the tempo of sex life, and cannot be dismissed as negligible by the student of sexual morale. While we need not become fanatics, it is unwise to ridicule unqualifiedly those who speak on the side of caution in these things. The trend is there, and best recognized for good or ill, rather than veiled under an assumed, because convenient, broadmindedness. If eroticism is to be the trend of the times, perhaps well and good. It may be that Nature is thus asserting herself in the struggle against modern economic checks

upon the sexual life. But the profitable eroticism has no excuse for being, and every act and every industry which makes a dollar out of the stimulation of sex impulses deserves the closest scrutiny and the most persistent supervision from those intent on sexual idealism.—*Dr. John H. Stokes.*

\* \* \* \* \*

The prevailing impression that men's ideal woman is without passion (though it may have a semblance of correctness in theory, is not so seriously taken in practice) makes women afraid and unwilling to admit their sexual inclinations, and leads them to suppress their desires. That some noble women at least, have strong sexual passions and suffer greatly by reason of their suppression is not sufficiently understood.

Aside from this there are other things which make women think themselves more frigid and with less sexual emotion than they really possess. Among these may be mentioned:

Disease or weakness of her sexual organs, especially after childbirth.

Fear of pregnancy and dread of the suffering and discomforts of childbearing, which are sometimes largely of their own making.

The trouble given by taking precautions to prevent conception and the uncertainty of the various methods employed acting as restraining influences on the ardor.

Ignorance of husbands about calling forth the desire and want of knowing how to do in order effectively to bring about the emotional climax.

Yielding to embraces without desire, together with giving evidence of performing a marital duty that is exacting and distasteful.—*Dr. C. W. Malchow.*

\* \* \* \* \*

Even if we refuse to believe that social-hygienic teaching will protect many young men from sexual diseases, there is the woman's need of information to be considered. Women more than men suffer the consequences of venereal infections. Therefore, every young woman who considers marriage should know the possibility of danger to herself and her children, and be able to decide accordingly. Of course, even with much knowledge, she may marry the wrong man, for correct diagnosis



of social disease is not always easy; but if her confidence is betrayed and she becomes infected, she ought to know the importance of immediate and radical medical treatment. Let me illustrate these statements that women should know the danger of venereal disease: One of my college friends neglected an important legal case to travel seven hundred miles in order to tell face to face another college friend that she was about to marry a dangerous man. Being utterly ignorant of the existence of sexual diseases, the girl and her mother characterized my friend's statement by a short and ugly word, and ordered him to leave their home instantly. The marriage occurred and some months later the young woman went to her grave, a victim of gonorrheal salpingitis and peritonitis.—*Prof. Maurice A. Bigelow.*

\*   \*   \*   \*   \*

*Sexual Ignorance and Frigidity.*—There are women who never experience the least pleasure during intercourse, and who cannot even understand the attraction of the act. They have become mothers several times without having had a single orgasm. The common belief, that woman becomes pregnant only when orgasm occurs in the coitus, has proven without foundation.

The most cases of that category concern women of abnormal organization, or those who have been influenced by ascetic teachings, or those who are panically afraid of childbearing, or others who have married without love and never have loved their husbands. Probably the husband in many cases has not properly conducted the sexual connection according to the laws of kindness, devotion and love.

Many men think it very strange that their wives never are passionate or enjoy the conjugal embrace. They consult physicians about the condition, but many of these have very little knowledge concerning sexual matters, the reasons for lack of orgasm in woman, and the rôle the man plays therein. They often say that many women are so constituted and one must be satisfied with the condition as it is.

My own opinion is that very few women would be sexually cold if proper ideas of sexual life were predominant, if real love connected with tender fondling were present in marriage, and if married people who wish no children would use proper instead of improper precautions.—*Dr. Anton Nyström.*

*Who Shall Marry?*—Marriage at an age *too youthful* (below twenty on the part of the woman, below twenty-four on the part of the man) and at *too advanced* an age (above forty on the part of the woman, above fifty on the part of the man) is also disadvantageous to the offspring, as manifested by higher mortality of the infants, by the more frequent occurrence of malformations, idiocy, rickets, etc. Equally disadvantageous is *too close relationship by blood*, since in this way any unfavorable tendencies are greatly strengthened. Upon a certain degree of inbreeding, or, rather, upon an approximation to inbreeding, depends the formation of every race. The “racial problem” in this sense is a kind of exaltation of the inbreeding principle, for the very idea of *race* implies a more or less close relationship between all the members of a definite stock. Thus the entire absence of fresh blood does not necessarily give rise to any degeneration; but it is certain that *long-continued close in-and-in breeding* on the part of near blood-relatives in the same family results in a *progressive tendency* to degeneration, because, among those who unite in marriage, the same morbid tendencies are present, and accumulate in consequence of the inbreeding. Marriage between uncle and niece, or between aunt and nephew, and the, unfortunately, far too frequent marriages between first cousins, are therefore to be condemned.—*Dr. Iwan Bloch.*

\*     \*     \*     \*     \*

In former times the woman exclusively was considered at fault in every case of barrenness or sterility. When the wife failed to endow her master with an heir she was packed off to the doctor, and she was subjected to all kinds of treatment, curettings, dilatations, etc., and if the treatment remained ineffective, she was often divorced. In this man-made world it never came to the people's and even to the doctors' minds to search for the cause in the man. As a matter of fact, we know now that in a large percentage of cases it is the husband and not the wife who is to blame for sterility? In my own practice I have found the husbands to be the cause in 80 per cent of childless marriages. He is either suffering with congenital aspermia, or what is more common, azoöspemia, or his ejaculatory ducts have been sealed by a bilateral gonorrheal epididymitis, or he infected her and made her sterile. And I never treat now a woman for alleged

sterility until after I have examined her husband, for a five minutes' examination of the husband often saves the wife months and months of useless treatment. But the world at large is still ignorant of these facts, and the wife is still made the scapegoat in cases of sterility. Sometimes the husband who is exclusively the cause of the sterile marriage uses the sterility as an excuse to get rid of his wife. Luckily the women are beginning to learn something.—*Dr. William J. Robinson.*

\*       \*       \*       \*       \*

Let us remember the wide diffusion of the newspapers of our day. We cannot prevent children from reading newspapers; a statement that applies not to large towns merely, but to small towns and to the country districts as well. I speak here, not only of newspapers which are known to be sensational, but of others as well. The more serious periodicals are today often inclined to devote a good deal of space to many sexual occurrences; they even err in transforming many non-sexual matters into sexual ones, giving them a superfluous erotic background. They miss no chance of converting an ordinary murder into a lust-murder; of describing a common assault as the outcome of sadism; and of writing of any woman of whom mention has to be made in connection with some public occurrence, as a young lady of surpassing beauty. But apart from all this, the newspapers are today so full of sexual matters (the question of sexual enlightenment, the prevention of the venereal diseases, the suppression of prostitution, the protection of motherhood, etc.), that with the best will in the world it is impossible to keep children from reading about such things. Nor can this be regarded as unfortunate, so long as these questions are treated in a moderate manner.—*Dr. Albert Moll.*

\*       \*       \*       \*       \*

*Protect Your Boy From Quacks.*—There is no other subject which so troubles and worries the average youth of a certain age as fear that something is the matter with his sexual life. The very secrecy which surrounds it tremendously aggravates his worry, because he does not dare consult his parents about it. Not one boy in a thousand, under such circumstances, would frankly go to his father for advice for he feels guilty; and he would not dare to go to an older friend, or even to the family



physician. There are medical quacks who know this only too well, and they take every possible advantage of his delicate situation.

There are thousands of parents who think that their boys have never known evil, that they can not by any possibility be contaminated, and yet they may be constantly answering advertisements concerning "lost vitality," "lost manhood," and the "errors of youth." These parents little realize the tremendous harvest which the quacks are reaping from their sons, through the effects of their subtle advertisements and criminal literature describing the results of "lost manhood."

Away with this foolish criminal mask of silence which leaves your son at the mercy of such charlatans! If you have not safeguarded him with proper instruction at the outset, at the most dangerous period in his life when he has stood tiptoe on the threshold of opening manhood, at the very door of his future, at least come to his rescue now and save him from becoming a victim of all sorts of quacks, who will bleed him, mislead him, and possibly drive him to utter ruin.—*Rev. Orison Swett Marsden.*

\* \* \* \* \*

Woman's first actual sexual experience can not, for anatomical reasons, be altogether agreeable, but is most often more or less painful, and its memory not readily effaced.

The existent emotion will have received a sudden shock, but the actual injury is but slight and the discomfort temporary and overshadowed by subsequent desire, if due consideration be shown.

In some rare instances the hymen, which obstructs the vaginal entrance, is of such size and structure as to impede progress, but when once ruptured and healed, which it ordinarily very readily does, the subsequent acts are never painful when properly done and normal physical conditions prevail.

Cases are now and again encountered by physicians where a rigid hymen is found intact several months or even years after marriage, but these only emphasize the prevailing popular ignorance of sexual matters.

Until such a time when a woman really knows all that the sexual act affords, the bedroom etiquette of the pair and the varying results are very largely what the man makes them; but

after this time, in everyday life, it is practically the woman who is most responsible for the congeniality of the sexual relations.

Some women will not discuss or reveal to their husbands their personal sexual status, but will confide to the physician many things which if known to the husband and judiciously acted upon would very often be conducive to the couple's mutual benefit.—*Dr. C. W. Malchow.*

\* \* \* \* \*

*It is obvious that the more extreme and unqualified opinions in favor of sexual abstinence are based not on medical, but on what the writers regard as moral considerations. Moreover, as the same writers are usually equally emphatic in regard to the advantages of sexual intercourse in marriage, it is clear that they have committed themselves to a contradiction. The same act, as Näcke rightly points out, cannot become good or bad according as it is performed in or out of marriage. There is no magic efficacy in a few words pronounced by a priest or a government official.*

Remondino once remarked that the authorities who have committed themselves to declarations in favor of the unconditional advantages of sexual abstinence tend to fall into three errors: (1) they generalize unduly, instead of considering each case individually, on its own merits; (2) they fail to realize that human nature is influenced by highly mixed and complex motives and cannot be assumed to be amenable only to motives of abstract morality; (3) they ignore the great army of masturbators and sexual perverts who make no complaint of sexual suffering, but by maintaining a rigid sexual abstinence, so far as normal relationships are concerned, gradually drift into currents whence there is no return.—*Havelock Ellis.*

\* \* \* \* \*

Woman too often forgets. She has been so thoroughly "domesticated" by man that she feels too readily that after marriage she is all his. And by her very docility to his perpetual demands, she destroys for him the elation, the palpitating thrills and surprises of the chase.

In the rather trivial terms of our sordid modern life it works out in many marriages somewhat as follows: The married pair share a bed room, often even a bed (though this detestable habit

is fortunately rapidly decreasing) and so it comes about that the two are together not only at the times of delight and interest in each other, but during most of the unlovely and even ridiculous proceedings of the toilet. Now it may enchant a man once—perhaps even twice—or at long intervals—to watch his goddess screw her hair up into a tight and unbecoming knot and soap her ears, but it is inherently too unlovely a proceeding to retain indefinite enchantment. To see her floating in the deep clear water of her bath—that may enchant forever, but the unbeautiful trivialities essential to the cleansing processes of a bath tend only to dim the picture and, if repeated, to dull the interest and attention that should be bestowed on the body of the loved one. Hence, ultimately, everyday association in the commonplace daily necessities tends to reduce the keen pleasure each takes in the sight of the other. And hence, inevitably and tragically though stealthily and unperceived, to reduce the keenness of stimulation the pair exert on each other, and thus to lower their intensity of pleasure in the sex act.—*Dr. Marie Carmichael Stopes.*

\* \* \* \* \*

One of the strongest sexual excitements which directly concern only men but indirectly leads to mutual erethism is the modern woman's dress. Although from time immemorial woman always so dressed as to accentuate and bring into prominence her secondary sexual characteristics, yet the former modesty, the customs and certain sumptuary laws dictated moderation in this respect. The modern woman acknowledges no restraint. She copies slavishly the Parisian fashion which, as a rule, is a creation suggested by the demi-mondaine and designed to increase her trade by exciting the passions of the other sex. The modern woman throughout the civilized world consciously or unconsciously imitates her erring Parisian sister. Not only does she try to bring into bold relief by means of the corset her main secondary sexual characteristics, her bosom and her pelvis, but by means of her hose supporters, her legs and the space between them are only partly veiled. Thus a really obscene effect is created which is far more exciting than if she were perfectly nude. The effect of contrast and expectation renders the partly veiled nudity more exciting. This is the psychological reason why man tries to conceal his natural state and covers it by artifice,



while animals try to win their mates by showing and exposing their sexual qualities.

All these artificial excitements tend to create voluptuousness and lead to excesses in venery. These excesses have the indispensable consequences of making a large number of our men and women highly neurasthenic.—*Dr. Bernard S. Talmey.*

\* \* \* \* \*

In dealing with the alleged absence of the sexual impulse, a well-informed medical correspondent writes, much caution has to be used in accepting statements as to its absence from the fact that most women fear by the admission to place themselves in an impure category. I am also satisfied that influx of women into universities, etc., is often due to the sexual impulse causing restlessness, and that this factor finds expression in the prurient prudishness so often presenting itself in such women, which interferes with coeducation. This is becoming especially noticeable at the University of Chicago, where prudishness interferes with classical, biological, sociological and physiological discussion in the classroom. There have been complaints by such women that a given professor has not left out embryological facts not in themselves in any way implying indelicacy. I have even been informed that the opinion is often expressed in college dormitories that embryological facts and discussions should be left out of a course intended for both sexes. Such prudishness, it is scarcely necessary to remark, whether found in women or men, indicates a mind that has become morbidly sensitive to sexual impressions. For the healthy mind embryological and allied facts have no emotionally sexual significance, and there is, therefore, no need to shun them.—*Havelock Ellis.*

\* \* \* \* \*

The tumescent state in both husband and wife is the true, natural, and one might add ethical, state for conjugation. This simple fact is, however, far from universal acceptance among highly cultured men in most western nations. The neglect of this biological law is a prime cause of tragedy in countless marriages. Outrage can be perpetrated in wedlock without any fear of legal punishment. Any discussion of the morality of marriage that ignores this factor of misery is entirely inadequate. We should inform all prospective husbands in the psychology of

conjugality. For this is by no means a mere physiological, or as some say, "animal" act. Conjugation is for the thoughtful woman, to a much greater degree than for the man, an impressive and very significant rite. Even in the instance of a woman of coarser mold, intercourse is inevitably associated with maternity. The outcome may be months of pain, followed by a going down to the very gates of death, and even the loss of life. For the refined woman, there are elements symbolic, sacramental, and complexly emotional in the linking of psyche and body. And profanity or ribaldry may be so abhorrent that a mere expression may unbalance the delicate emotional poise. Many women become morbidly prudish or frigid through the crude and primitive roughness of a gross, or unobservant and thoughtless, husband.—*Walter M. Gallichan.*

\*   \*   \*   \*   \*

Another type of parents who should know the reasons for sex-instruction are those who accept the traditional idea that their daughters must be kept "protected" and "innocent" while their sons are free to sow a large field of "wild oats," concerning which Society in general, and such parents in particular, will care little as long as social diseases, bastardy suits, or chronic alcoholism do not result from the dissipations. These are the fathers and mothers who need the most enlightenment concerning the importance of such sex-instruction as will make clear the far-reaching consequences of "wild oat sowing." Perhaps most such parents are ignorant, but some are simply thoughtless. As an illustration of the latter, the editor of a well-known magazine was recently talking with a prominent author and made some reference to the immoral habits of young men. Their conversation was essentially as follows: The author remarked, "I assume that my boys will be boys and will have their fling before they settle down and marry." The editor quickly replied, "Yes, and I presume that you expect your boys to sow their wild oats with my daughters, and that in return you will expect my sons to dissipate with your daughters. At any rate, you have damnable designs on somebody's daughters." This put on the wild-oat proposition a light which was apparently new to the literary man, for he replied, "That is a phase of the young man's problem which never occurred to me. It does sound startling when stated in that personal way."—*Prof. Maurice A. Bigelow.*

There is no one thing that causes the average boy in his teens so much misery and induces suffering from the pangs of conscience in his thoughtful moments as the knowledge of his own solitary or artificial sexual practices.

Oftentimes these reproaches are prolonged into middle life and occasionally old men still attribute their ailments to what is termed "youthful folly."

It is exceedingly hard to tell just how far admonition shall go, but it should not be carried to the point of so thoroughly frightening the youth as to destroy his morale and pluck. Nothing does this more readily than the false and fabulous stories which are told about the consequence of this habit.

*Young lives are blighted and brilliant careers prevented by withholding the truth and grossly exaggerating or misstating the natural results of this habit.*

Many men can look back upon their earlier lives and realize that the consequences of self-abuse were pictured to them in the most appalling colors and the efforts of their parents and teachers, with the kindest intentions, did more harm than good by their attempts to stop it. They subsequently, under conditions forgetting the past, find to their great astonishment that their powers are good and this proves to be their salvation. The knowledge of their retained manhood puts new life into them and convinces them that the statements of kindly-disposed persons were erroneous, and they become sound men.—*Dr. C. W. Malchow.*

\* \* \* \* \*

No disease has such a murderous influence upon the offspring as syphilis; no disease has such a destructive influence upon the health and procreative function of woman as gonorrhea. Since the welfare of the human race is largely bound up in the health and productive capacity of the wife and mother, the sanitation of the marriage relation becomes the most essential condition of social preservation. It is well known that gonorrhea often destroys the most important organs of special sense, resulting in the terrible affliction of blindness. It has been computed that from 20 to 30 per cent of the blindness in this country is caused by gonococcal infection. Who are responsible for the introduction of venereal diseases into marriage and the consequent wreckage of the lives of innocent wives and children? Not, as a rule, the



practiced libertine or the confirmed debauchee; but, for the most part, men who have presented a fair exterior of regular and correct living—often men of good business and social position—not infrequently what are considered the good “catches” of society—the men who, indulging in what they regard as the harmless dissipation of “sowing their wild oats,” have entrapped the gonococcal infection. Who are responsible for the introduction *selves cured, sometimes even with the sanction of a physician, marry innocent women and implant in them the seeds of disease destined to bear such fearful fruit.* Gonorrhea is the most widespread and universal of all diseases in the adult male population, embracing 75 per cent, or more. The prevalence of syphilis, though not nearly so universal, is variously estimated at from 5 to 18 per cent.—*Dr. Prince A. Morrow.*

\* \* \* \* \*

The majority of prostitutes are mentally deficient or feeble-minded.

This has been proven during many investigations.

If we are in earnest about eradicating the hideous business of prostitution we must take this fact into account. The truth is that such girls are not responsible, and no matter where you place them in society, they are bound to continue the practice of immorality.

“ ’Tis true, ’tis a pity—and a pity ’tis, ’tis true.”

But the fact remains and no amount of argument or theorizing can alter it. If we are really in earnest, there is only one thing that can be done, and it must be done if we are to make any permanent progress. These girls must be placed in institutions under custodial care, and that care, together with supervision and training, will most likely have to be exercised during the rest of their lives. This will prove an expensive business, but it is the only real remedy and it can be proven that it will surely pay even when computed in dollars and cents.

But what about the men? A man cannot be arrested as a prostitute because, up-to-date, there is no such thing as a man prostitute.

Unjust discrimination, is it not? Yet a man gets a venereal disease and is enabled to conceal it from everyone. He, too, may be, and often is, a mental defective and can pass on disease to

others with impunity. *Male mental defectives must be placed under custodial care in exactly the same way as the female and should be kept under such care and under the closest supervision all the rest of their lives.*—*Dr. Oswald C. J. Withrow.*

\* \* \* \* \*

*Blindness Caused by Gonorrhea.*—Children are not born blind as an effect of gonorrhea. They contract it during the process of being born, and if the eyes are not cared for after the germ gets into them, blindness is very likely to result.

There is a man in our city who makes his periodic trips to Salem to see two of his children who have been blind from birth due to gonorrhea. I do not think he knows the cause of their blindness, but in spite of the grief it would cause him, he ought to know it to ward off future trouble. Now just what is the matter with those children's eyes? Their eyes, as eyes, are just as good as yours or mine except that they have ground glass for windows instead of clear glass, so to speak, through which the light can pass. The germs were picked up during birth and were not washed away or destroyed by an antiseptic. They began to develop just as they do in the genital organs. As stated above, they live on the cells of the tissues. Consequently they attack the lining of the eye and the cornea, which is the transparent tissue through which light enters the eye. If the injury to this tissue is sufficient to make little ulcers on the surface, as it usually does, scar tissue forms as the process subsides and the cornea heals. Light cannot penetrate scar tissue, and hence the child is left in darkness when its eyes are as good as ever, only they cannot see out, or to be more accurate, the light cannot get in. There is no cure for the condition. When we think of the thousands who must spend their life in darkness it is surely time to question whether gonorrhea is "no worse than a bad cold." Twenty-five per cent of the blindness in the United States is due to gonorrhea. In foreign countries the percentage is much larger.—*Dr. J. Allen Gilbert.*

\* \* \* \* \*

The estimates of the proper frequency of sexual intercourse may always be taken to assume that there is a cessation during the menstrual period. This is especially the case as regards early periods of culture when intercourse at this time is usually re-

garded as either dangerous or sinful, or both. Under civilized conditions the inhibition is due to esthetic reasons, the wife, even if she desires intercourse, feeling a repugnance to be approached at a time when she regards herself as "disgusting," and the husband easily sharing this attitude. It may, however, be pointed out that the esthetic objection is very largely the result of the superstitious horror of water which is still widely felt at this time, and would, to some extent, disappear if a more scrupulous cleanliness were observed. It remains a good general rule to abstain from sexual intercourse during the menstrual period, but in some cases there may be adequate reason for breaking it. This is so when desire is especially strong at this time, or when intercourse is physically difficult at other times but easier during the relaxation of the parts caused by menstruation. It must be remembered also that the time when the menstrual flow is beginning to cease is probably, more than any other period of the month, the biologically proper time for sexual intercourse, since not only is intercourse easiest then, and also most gratifying to the female, but it affords the most favorable opportunity for securing fertilization.—*Dr. Iwan Bloch.*

\*   \*   \*   \*   \*

It seems almost incredible that in some countries medical men who are not ashamed to throw young men into the arms of prostitution blush when mention is made of anti-conceptual methods. This false modesty, created by custom and prejudice, waxes indignant at innocent things while it encourage the greatest infamies.

It is important to observe that Holland, the country which takes *most* care that children shall be well and voluntarily conceived, has increased its survival-rate and has thereby not diminished but increased its population, and has the lowest infant mortality in Europe. *While in America, where the outrageous "Comstock Laws" confuse wise scientific prevention with illegal abortion and label them both as "obscene," thus preventing people from obtaining decent hygienic knowledge, horrible and criminal abortion is more frequent than in any other country.*

It should be realized that all the proper medical methods of preventing undesired pregnancy consist, not in destroying an already growing embryo, but in preventing the male semen from



reaching the unfertilized egg cell. This may be done either by shutting the semen away from the opening of the womb or by securing the death of *all* (instead of the natural death of all but *one*) of the two- or three hundred million spermatozoa which enter the woman. Even when a child is allowed to grow in its mother, all these hundreds of millions of spermatozoa are inevitably and naturally destroyed every time the man has an emission; and to add one more to these millions sacrificed by Nature is surely no crime. To render inert the ejaculated spermatozoa which would otherwise die and decompose naturally is a simple matter, now familiar to every intelligent physician and layman.—*Dr. August Forel.*

\* \* \* \* \*

So widespread is this evil (*abortion*) that you can scarce pick up a paper without finding some abortion nostrum advertised. Scan the next paper that comes into your home and see if the virtues of some tansy, pennyroyal or other feticidal compound be not therein set forth. Were these crime promoters not extensively sold the murderous scoundrels who manufacture them could not annually expend vast sums of money without “public educators” for their exploitation. These advertisements frequently suggest the crime; that is their intent; hence publishers who insert them are the co-partners of abortionists and share both the iniquity and the cash. But even this costly advertising does not indicate the extent of the evil, for by far the greater part of those married women who desire to avoid maternity are their own practitioners—paying the penalty with premature age, impotency and pain.

In ancient Sparta theft was considered proper, but getting caught a crime. Modern society has improved upon that peculiar code. Adultery—if the debauchee have wealth—is but a venial fault, and to be found out a trifling misfortune, calling for condolence rather than condemnation.

It is well enough to protect the honor of children with severe laws and a double-shotted gun; but the average young woman is amply able to guard her virtue if she really values it, while the married woman who becomes so intimate with a male friend that he dares assail her continence deserves no sympathy. She is the tempter, not the victim.—*Brann—The Iconoclast.*

The question of how frequently to indulge in sexual refreshment is one which agitates the mind of nearly everyone at some time during the married life.

Like any other exercise, a certain amount is unquestionably beneficial, but just what that amount is it is very difficult if not impossible to state, and no fixed rules can be formulated that would strictly apply to even a majority of people at all times.

Very much depends upon the age, temperament, social conditions, habits of eating and drinking, climatic states, and especially previous sexual habits.

In the neighborhood of twenty years of age the person is capable of greater activity and all of his functions are susceptible to greater elasticity than is usually found a couple of decades later. Any exercise, including sexual, which would be readily borne and speedily recovered from in the earlier period might be excessive in later life.

Inclinations are to some extent transmitted by heredity, which makes some hardy and others less stable, and a certain amount of exertion would in one instance be tolerated and even strengthening, but might in another of opposite temperament be sufficient to cause fatigue and be injurious.

Conditions of life that render excitation more or less frequent require periods of relaxation to counteract the excitability if a happy medium is to be maintained. Sexual indulgence may be considered a sedative, but a frequency of intercourse under conditions that are recurrently exciting would be depressing if the influence of association did not create the demand.—*Dr. C. W. Malchow.*

\* \* \* \* \*

If young men could see the diseased vagina as the physician sees it, by electric light and microscope, they would not be so quick to throw away the priceless heritage of good health for the privilege of contact with the pus-poisoned genitals of the prostitute. No one has such a profound respect for venereal disease as the physician who daily may come in contact with infection. Observe him hasten for antiseptics after coming into contact with infection. None of it for the wise physician!

Think of the millions that would be released for helpful things if men were to surrender polygamous pursuit. Think of the millions that are spent in the chase after the sexual joys that

turn to gall and wormwood, the millions that apparently are largely wasted as far as benefiting the world is concerned. The courtesan will consume as much wealth in a year as would aid many to a happier life. Then after it is all over, and the man has had his "fun," it is universal experience that his reflection must be "I was an ass!"—and there is none to dispute the admission.

It will soon be impossible for any man to deceive his wife as to the venereal infections. The *Ladies' Home Journal*, with a million circulation, has placed before the women of the country definite information on the subject. Other magazines treat the subject openly in their columns. The future generation of intelligent young women will be fully conversant as to the results of infection. The poisoning of women and children must come to an end. Soon Society will not accept any excuse for a gonorrheally-blinded child or for the venereal debauchment of the wife.—*Indiana State Board of Health.*

\* \* \* \* \*

*The Sins of the Father.*—I know of an instance where a man, a kind father and loving husband, had been led one Christmas Eve to indulge in a large bowl of hot drink. At the conclusion of the bout someone suggested that they go to a certain place and finish up the night. This man went with the crowd; two mornings later he awoke to find himself diseased. Ashamed to go to his family physician he quickly sent to one of the neighboring cities for medicine. When it came he began to treat himself. A few days later his wife told him that she and the children all had very sore eyes and to call in the doctor. This he neglected to do until late in the day. When the doctor made his examination he called the man aside and asked him where he had been and what he had. The astonished man replied, "Nowhere, nothing"; but the doctor shook his head and told him that he knew better. "Do you know what ails your family?" "Nothing but sore eyes, I suppose," the man replied. "Your wife and children all have gonorrheal ophthalmia," said the physician, "though I have not explained the disease to them. Now come and tell me about it." So the man showed him where the roller towel on the back porch served for the family. "So," the doctor said, "you have treated yourself and washed here and they have used these



same towels, and now they are all victims of your sin. Your youngest child will perhaps not entirely lose her sight but she will never recover fully the perfect use of her eyes." Upon hearing this the man burst into tears and cried for forgiveness, but it was too late for tears to be of any avail! He had brought this suffering upon all the innocent members of his family.—*Evangelist M. B. Williams.*

\* \* \* \* \*

*Sexual Intercourse During Pregnancy.*—The question whether sexual intercourse is permissible during pregnancy is often put to the physician. Some extremists and theorists demand complete abstinence during the entire duration of pregnancy. Such abstinence is not only not feasible, but is unnecessary and may prove a disrupting factor; it may create not only dissension, it may wreck the love-life of husband and wife. I know of cases where the wife, influenced by the wrong teachings about the necessity of complete abstinence during pregnancy, about the possible injury to the child from intercourse, persisted in keeping the husband away; and the result was that the husband began to go to other women, and he got in the habit to such an extent that he refused to give up entirely, even after the child was born. It cannot be expected from a married man, who is used to more or less regular sexual relations, to abstain entirely for nine or ten months. Such a demand is unreasonable and uncalled for. All claims about the injurious effects of intercourse on the mother and child lack proof and foundation. During the first four months of pregnancy no change need be made in the usual sex relations. Their "intensity" should be moderated, their frequency need not. During the fifth, sixth and seventh months intercourse should be indulged in at rarer intervals—once in two or three weeks—the act should be performed without any violence or intensity, and the usual position should be reversed or changed to a lateral one. During the eighth and ninth months relations had best be given up altogether.

And this abstinence should last until about six weeks after the birth of the child. During this period the uterus undergoes what we call involution: that is, it goes back to the size and shape it had before pregnancy, and it is best not to disturb this process by sexual excitement, which causes engorgement and congestion.—*Dr. William J. Robinson.*

The ideal of strict pre-conjugal continence may be said to be universally advocated, though in the civilized nations it is comparatively rare in practice among the male population. The view that no men are entirely chaste is of the same order of generalizations as the assertion that all men are intensely libidinous and addicted to sexual vice. There are many men who have never indulged in "venal love," and there is a certain small proportion whose restraint is as complete as that of a vestal virgin. Among the positive celibates we must class the impotent, the atrophied, the non-sensual by nature, the anesthetic, and the sexually ill-developed, the persons who have lost normal desire through long-continued auto-erotic gratifications, and some of the sufferers from forms of nerve disorder. In another category are the sexually normal and vigorous who control themselves through stern effort in obedience to religious precept or a high ideal of purity.—*Walter M. Gallichan.*

\* \* \* \* \*

Our present formality, combined with general ignorance of girls on sexual matters, renders a mutual understanding prior to definite betrothal generally impossible. Moreover, there is a sort of hysterical and pathological love, the product of the imagination, which is associated with sentimental words and sighs as well as coquetry, but transformed into disgust or hatred by the first coitus. Although more common in women, this false love is met with in hysterical men. Sometimes the illusion disappears while there is yet time to break off the betrothal.

For a number of reasons, both parties should be medically examined before marriage. This precaution may reveal the presence of a narrow pelvis or vaginismus in the woman, or aspermia, venereal disease, etc., in the man.

When a woman will only support coitus with a view to procreation, it is her duty to inform her *fiancée*, who can then consider whether he will submit to such restriction. If the wife will not allow her husband a concubine, it only remains for him to renounce his marriage, or to procreate children extra-nuptially.

My opinion on this subject will no doubt appear very immoral to many people, but it is natural and rational. It is needless to say that I do not intend that a man has the right to compel his wife to have intercourse whenever he pleases. The question is a

very delicate one; but, by the aid of good will a satisfactory solution of the problem can be obtained in most cases, in the manner indicated above. Love and mutual respect will always find a way out of the difficulty. It is necessary to avoid extreme asceticism and unnatural idealism on the one hand, and excessive sexual indulgence on the other hand. In the sexual question above all others it is the wisest course to strike a happy medium.—*Dr. August Forel.*

\* \* \* \* \*

*Syphilis as a Cause of Inebriety.*—Syphilis is a more frequent cause of inebriety than is generally supposed. Some of those who contract syphilis are highly sensitive men and women, with very exaggerated views of its probable effects. Their mental sufferings, whether they be from remorse, fear of discovery, or dread of future consequences, are acute, and induce a condition of nerves highly suitable to the growth of alcoholism. Or, on the other hand, they may totally despair of ever regaining their health, and in sheer desperation resort to drink. I am quite convinced that the contraction of this disease by some has a most demoralizing effect, breaking down the last barrier of self-respect, and leading to a consequent reckless plunge into all that is undesirable, indulging largely in spirits to enable them temporarily to forget their misery. The very company which they consort with only tends to encourage their drinking habits, in order to prey upon them so long as they have money to spend—then the end is not far off; the whole wretched story, beginning in one unfortunate indulgence—in some cases their very first offence.—*Dr. C. A. McBride.*

\* \* \* \* \*

*The Venereal Taint.*—The most horrible of all evils has crept into the bodies, and even the souls, of this generation. We have recently had many appalling examples of the horrors of war. Shot, shell and bayonet can tear human bodies into shreds. Famine sometimes counts its victims by the hundreds of thousands. Fire, floods and tornadoes have played havoc with human lives.

But all these cruel, devastating forces are more than equalled in horror by the venereal taint.

Venereal disease comes on you silently. It is usually the result of an indiscretion, but sometimes attacks one who is not



to blame. And once it has touched you it begins to eat its way into your life centers. It devitalizes your body, desecrates your soul.

Millions upon millions have paid the heavy penalties that it exacts. No words of tongue or pen can fittingly describe its horrors. Go into any hospital and watch the various phases of this disease in its progress, and you will know that no mutilated bodies on a battlefield of war at its worst could be more appallingly pitiable than the condition of the victims of this scourge.

Must this Gorgon-horror go on its way unmolested? Are we going to stand by with folded arms? Or are we going to find a remedy—make it possible for the men and women of this and future generations to avoid its destructive power?

Should we not signal with a red flag, and cry out a warning so loud that all can hear?

The recent World War has given us some fearful lessons, but one of the most valuable is the blow that it struck to prurient prudery—the real cause of this unspeakable evil.—*Bernarr MacFadden.*

\* \* \* \* \*

*You Cannot Compromise With Venereal Diseases.*—Unless cured syphilis and gonorrhea, or “clap,” know only one result—the destruction of the human body. Venereal disease in a person’s body must be driven out—every trace of it. Otherwise, it will spread and grow worse, sapping strength, undermining health and leading to serious physical disability; or, like an enemy under fire, it may retreat from sight, leaving the impression that the body is safe and sound again. Unless completely cured, it lurks in the body and may break out again, years later. That is the deception and treachery of venereal disease.

Self-treatment with simple or patent remedies will not cure venereal disease. It may cause the outward symptoms to disappear, but to cover up a disease is not to cure it.

The only safe and certain way to a complete cure of venereal disease is treatment by a competent physician or venereal clinic. Also, it is just as necessary to continue the treatment until rigid medical tests show a complete cure. Some of the most serious after-effects of venereal disease are due to stopping treatment too soon.

Self-treatment probably costs less in the beginning but you are fighting a dangerous enemy, and the weapons must be chosen accordingly. The Allies, armed with pop-guns, could never have defeated Germany. Pop-guns cost less but the most expensive things in the long run are those that do not give results, and the self-treatment of venereal disease *does not* give results.

So, if you have intended to treat yourself for a venereal disease, or have started to do so—

*STOP! Even though you may be improving—STOP!!—RIGHT NOW!!!*

Go to a competent physician or venereal clinic. Avoid quack doctors or medical institutes advertising quick cures. They are far more interested in your pocketbook than in your recovery.

Remember that cheap treatment for a dangerous infectious disease never pays. With health wrecked or only partly restored, the money saved by such treatment can give little pleasure.

Always remember that venereal disease *can* be cured. But do not forget that neglected or improper treatment may ruin a person's health beyond repair.

Take no chances when attacked by anything so treacherous as a venereal disease.—*Dr. Rupert Blue, Former Surgeon-General of the United States Public Health Service.*

\* \* \* \* \*

*Some Results of Ignorance and Prudery.*—Syphilis is the disease responsible for an asserted 90 per cent of locomotor ataxia, a large per cent of insanity (syphilis, acquired and hereditary), for a great number of still-born children and for a heavy percentage of premature deaths of children, for apoplexy, paralysis and sudden death long after the disease is supposed to have been eliminated. Insurance actuaries hold that on an average syphilis shortens life one-third. Yet because of ignorance of the terrible character of this disease, is not uncommon to hear a young man laughingly boast to a companion as if it were something to be proud of: "I've caught a dose of chancres." What a mockery!

*The disease has been found not infrequently in the public schools and colleges. Yet no word as to its character or existence is permitted to be said in some of the schools, even to more mature pupils. How long must such a debauchment of American manhood continue? What an enormous bill of damages is laid to the door of prudery—"social cowardice," if you please!*

Again, it is not permitted to say to a young man: "If after being warned you go deliberately to the prostitute and contract this disease, you should consider yourself a social menace until informed that you are no longer an infectious agent. Moreover, young man, you have no moral, physical, or social right to enter into the state of marriage until you have been pronounced free from it, for if you are not free from it you may infect your wife, bring dead or diseased children into the world, thus inflicting a wrong not only on the innocent, but Society."

Has not the time also come when a woman shall have the tacit right to say to a young man who may ask her hand in marriage: "You demand chastity from me. In return, I ask that you certify that you have the physical right to become my husband and the father of a family."—*Indiana State Board of Health.*

\* \* \* \* \*

"*Pelvic Inflammatory Disease.*"—Pelvic inflammatory disease is a general term employed to describe the condition following an extension of a gonorrhea from the more external female parts upward into the structures of the lower abdomen. Pus tubes, for example, are a phase of pelvic inflammatory disease. If the germ escapes through the wall of inflammation thrown up by the body against it, and gets into the surrounding tissues, every part and structure in the neighborhood are involved in the fight, and intestines, omentum, and womb are matted together around and abscess that may later burst or be opened through the birth canal (vagina) or even the rectum. The treatment in cases of this type must often be the operation euphoniously called "hysterectomy plus bilateral salpingo-oöphorectomy" or "pan-hysterectomy." After it the woman is usually told that a piece of one ovary was left (as it often is) so that she can still feel she is a woman, since that is all the evidence of the fact that she will ever have from that time on, except that she will continue to wear skirts. For the benefit of her husband they leave her a vagina; for the benefit of herself, perhaps, a piece of ovary. To hear such a woman, so defenceless-looking in her braided hair and ether jacket, whisper timidly as they wheel her, uncomplaining, up to the operating table: "I do hope they'll fix me so I can have a baby"; to see the skin and muscles gape before the sweep of the knife; to think that woman's thoughts for her, through an



hour of ether haze and hushed comment and the peculiar sibilant click of forceps as the surgeon does his uttermost to cobble up the wreckage and save her hope; finally in despair he begins the quick swinging practiced movements that mean it all must go; and then to see her again a week later, after they have told her the ovary story, is an experience to make the hardest turn away his face.—*Dr. John H. Stokes.*

\*     \*     \*     \*     \*

*The "Bad Cold" Lie, Fakes, Drug Stores and Quacks.*—One of the great obstacles to the treatment of gonorrhea is an ancient lie expressed in the now hackneyed quotation of a current remark "*A dose of "clap" is no worse than a bad cold.*" This monumental falsehood is at last being nailed by the combined efforts of medical profession and laity, city, state and nation. With such an impression of the disease dinned into his ears by tradition and associates it is little wonder that the young man of the average type finds the restrictions and exactions of treatment irksome. It is little wonder also that he falls an easy prey to all sorts of quackery and to the wiles of Jimmy the drug clerk, who is always "there" with the right thing to take "to dry up a dose" and has no unpleasant ideas about the "water wagon" and avoiding sexual relations while the sure is going on. *Of course, the boy who "falls for" this stuff wakes up with a jolt some day, and crawls to some doctor's office with a chronic urethritis that may never clear up entirely, and a prostatitis and vesiculitis that have snuffed his chances for all that makes his later life what it ought to be.* There are no superlatives adequate to describe the human vermin who thrive on this sort of thing. Among them must be reckoned not alone the advertising quack and the men's specialist, but those commercial concerns which make and market, and those drug stores which permit upon their shelves the innumerable "specifics" for the self-cure of gonorrhea and "gleet," whose alluring promises appear upon the walls of every bar and toilet room. The "clap doctor," with his waving hair and the fatherly look and voice, is still with us. He is the man who plucks the inexperienced boy of the last cent he can beg, borrow or steal, and then turns him out with the words "That morning drop means nothing; you are cured." Not far removed from his level, to our shame be it said, is that type of physician, fortunately be-

coming more and more rare, whose conception of the cure of gonorrhea ends with "drying it up," and whose ignorance of the microscope and all the modern tests for cure is only equalled by his scorn of them.—*Dr. John H. Stokes.*

\* \* \* \* \*

*The Results of Gonorrhea.*—Following are some of the things that gonorrhea has done to many males and may do to any male who becomes infected and neglects the disease: Causes stricture or narrowing of the urethra. The inflammation leaves a scar. The urine not being able to pass freely sets up an annoying irritation in the urethra. A stricture often can be removed only by a long course of painful treatment. A surgical operation is often necessary. Causes swelling of one or both of the testes. Where there is double inflammation complete sterility may and often does result. Exceedingly painful and dangerous. Victim often suffers distinct loss of moral tone. Mental disturbances. Causes inflammation of delicate ducts and vesicles in deep urethra, sometimes superinducing an abscess, very grave and painful, necessitating dangerous operation. Sterility is again sometimes the result. Often loss of moral tone and mental disturbances. Causes gonorrheal rheumatism, one of the most painful diseases in medical knowledge. Here the germ enters the blood, finds a home in the joints, which swell to enormous size with extreme suffering. Ankylosis, or stiffening of the affected joints, is not infrequent, leaving the sufferer a permanent cripple. Causes gonorrheal ophthalmia. Gonorrheal pus transferred to the eye may extinguish sight in a few hours. It is an exceedingly stubborn and dangerous affliction. Causes disease of prostate gland. This gland situated at the neck of the bladder, is the "heart of the sexual system." Infection of that organ may be the cause of the disease becoming chronic or incurable with destructive effects on the generative function. Abscess sometimes results, necessitating a serious surgical operation. Causes a tendency, it is thought, toward tuberculosis of prostate gland and testes, resulting in dangerous and often fatal surgical operations. In women, causes inflammation of the ovaries, the Fallopian tubes and the womb, often necessitating radical surgery to save life of victim. Barrenness and life-long invalidism are, of course, the result.—*Indiana State Board of Health.*



*Gonorrhea of the Eye (Gonorrheal Ophthalmia).*—Gonorrhea of the eye is spoken of as *gonorrheal ophthalmia*, which while it can and does occur in adults, is overwhelmingly more common in children. The very first word that should be said about gonorrhea of the eye is that it can be *prevented*.\* The next word is, that if not prevented, it will probably cause blindness. Increasing knowledge of the first fact has diminished but by no means done away with the importance of the second. *Gonorrheal ophthalmia is a disease of the innocents.* The usual time of infection is in the passage of the child down the infected birth-canal of the mother. *The bare thought of a little chubby child's bright eyes being ground through the filthy pus of a "clap" sickens a decent man.* Yet this is exactly what happens, and its mother, all unknowing, is made the doer of it. Usually within twenty-four hours after birth, if a preventive has not been used, pus begins to form in the eyes, and with almost lightning-like rapidity the clear, bright cornea of the eye ulcerates, under the swollen, pus-filled lids, breaks through, and lens and all collapse into the opening. When the process subsides, the baby is blind. *The mere statement that one-third of the blindness in asylums and one-half the blindness dating from birth is due to gonorrhea of the eye conveys no impression whatever of the tragedy.* One has to see one of these little children, rocking back and forth in a railed-in chair, waving its hand between face and window because that flickering of the finger shadows across the twilight is all it will ever know of more than half of life, one has to see this thing, and watch the baby groping about on the floor and gurgling as it feels of your shoe-strings, really to know in the soul of him, what gonorrhea means.—Dr. John H. Stokes.

\* \* \* \* \*

*The Unfair Double Standard.*—The world has formerly excused sexual immorality in men while insisting upon purity in women. One reason is that the sex instinct is more easily aroused in most men than in most women. The stronger feeling is due to

---

\* The prevention of gonorrhea of the eye is accomplished by the use of a 1 per cent solution of silver nitrate, which is dropped into the eyes immediately after birth. In the vast majority of civilized countries this is now a universal and legally compulsory practice. It is required by most of our states, and it should be done on every baby born into the world, no matter what its parentage. The necessary medicine and directions for carrying out this protective measure can be obtained from any state board of health. The universal observance of this preventive measure will in time banish from the earth the gonorrheal blindness that begins in infancy.



one of Nature's measures for promoting new life. Since the egg-cell of the mother is in readiness only at infrequent intervals, the sperm cells must always be in readiness to unite with the ovum in order that it may not be lost.

But we are beginning to face facts, and no longer excuse men who do not control their sex impulses. *Physicians tell us that sex union is not necessary to the health of men, as many people used to believe.* This was one of the important lessons taught to every American soldier by order of the Government during the War. Any man who claims that sexual intercourse is necessary to his health is ignorant of the facts, or else is using the lie basely to induce some girl to sacrifice herself for his pleasure.

There is no longer any excuse for a different standard of morality for men and women.

Women and girls are to a great extent responsible for setting and maintaining a new standard.

In the first place, they must demand clean living from the men of their choice; and in the second place, they must help them by avoiding actions which arouse this natural but dangerous impulse and make it difficult for them to control their conduct.

Many girls thoughtlessly stimulate the sex emotions of their men friends by careless words, familiar acts, and too thin or otherwise "suggestive" and conspicuous clothing.

A girl, sure of her own self-control, may see no harm in indulging in a flirtation, but she may not be aware how greatly she is arousing the feelings of the man and making herself responsible for his temptation and mistakes. If she is not the sort of girl from whom he can obtain gratification for his feelings, it frequently happens that he will go elsewhere to other girls who may be less able to protect themselves. There is a physical danger also to the self-controlled girl who indulges in frequent "spooning." Long-continued "spooning" involves an emotional strain which saps the vitality and weakens the girl both physically and mentally. It sometimes makes her incapable of real affection in marriage.

If girls are to demand clean living from their men friends they must learn to treat them in a frank and friendly way as comrades and to help them maintain a high standard, instead of trying to win their admiration by purely physical appeal.—*Ohio State Board of Health.*

*The Tragedy of the Nuptial Chamber.*—When first entering upon the marriage relation, young husbands are in danger of making some very serious mistakes. Many a husband has had cause to regret that in his lack of consideration he has allowed his passion to awaken in his wife such a feeling of disgust as to obliterate her affection for him, to blast the prospects of all future happiness, and to render both himself and his wife miserable throughout all their subsequent years. \* \* \* With ignorance on the one side, inconsideration and ungovernable passion upon the other, the combination is unfortunate and the results are often serious. The first act of the drama which is to culminate in separation and an effort to secure a divorce, is often enacted upon the night of the very day which witnessed the marriage ceremony. The ignorance and inconsiderateness or both are alike to blame for this sad result—the wife for her lack of knowledge and consideration, and the husband for his lack of intelligent and thoughtful appreciation of the delicacies and dangers of the new relation. \* \* \* It is enough to make a thoughtful and considerate man blush to think of the scores of wives who annually confess to their physicians that the only rape that was ever committed upon them was by their own husbands the first day of their married life.—*Rev. Sylvanus Stall.*

\* \* \* \* \*

*Don't Brush the Bloom from the Fruit.*—Do not be in too great haste to brush the bloom from the fruit you covet. It will lose half its attractions at once. Practice in lawful wedlock the arts of the experienced lover rather than the violence of the man who commits rape, and you will find the reward of your patience very sweet and lasting. This bud of passion cannot be rudely forced open. Its development must be the work of time. If the young wife is met with violence, if she finds that her husband regards the gratification of his own desires more than her feelings—and if she be worn and wearied with excesses in the early days of her married life, the bud will be blighted. The husband will have only himself to blame if he is bound all his life to an apathetic, irresponsible wife. It is easy to imagine the unsatisfactory conjugal relations which are brought about in punishment of the husband's early impetuosity and ignorance. He finds an unreciprocal wife, doubts her affection for him, because

with his masculine nature, he cannot conceive of a love unblended with passion. She, in her defrauded womanhood, feels aggrieved and debased by any conjugal approach—especially by an enforced one—and finds it equally hard to understand how affection and passion can be united; the one she knows to be so self-forgetful and denying, and the other she has such abundant cause for believing utterly selfish and rapacious.—*Dr. E. B. Duffy.*

\* \* \* \* \*

*Methods and Technic of Sex Instruction.*—The age at which children begin to acquire first impressions of sex is much less than is commonly supposed, and much earlier than the age of the official attempts to impart information. The estimated age of first sexual impressions in a large survey was 9.6 years, the age at which wholesome instruction was first received 15.5 years. The sex education of children as such must, therefore, be begun much earlier than puberty, as previously pointed out. If the parent frankly confronts the first questions asked by the child and answers them simply, truthfully and directly, without too much detail, the simplicity of the child and the entire absence of the self-consciousness of puberty will make the situation easier to manage thereafter. The child should be repeatedly impressed with the fact that the source of information on such matters is the father and mother, not friends and companions, and that the subject is never to be discussed outside. Emphasis on the impersonal and larger aspects of sex is essential. Children respond well, in my experience, to explanations of honorable conduct toward each other. The physical side should be biologized at first by the use of plants and other animals, but to be effective it must always come back to human beings, although an excessive literalism is to be avoided. While corn and tiger lilies and other examples from real life are valuable, pictures of human anatomy are generally conceded to be undesirable because too suggestive. The choice of words is the most embarrassing problem to the untrained. It can be overcome to no small extent by reading some of the literature illustrating methods of approach, which is obtainable from accredited sources at the present time. During the earlier years of a child's life it should be taught personal cleanliness, learn not to meddle with the genitalia, and acquire a profound respect for these parts, which little children learn well on repeated insistence.



*If children are found to have made a false start, it is the height of folly to resort to fear or threats. Both of them drive the child violently in upon himself, and in the case of masturbation especially, lead to mental states infinitely worse than the original trouble. In the earlier years is laid the whole foundation of the intimate friendliness between parent and child which will draw the two together and make the child approachable during the transitions and self-consciousness of puberty. The parent must play an active part and move toward the child, not wait for the latter to approach him. It is surprising how easily satisfied a child's curiosity is, and how often vicious information comes to him gratuitously, and not of his own seeking.—Dr. John H. Stokes.*

\*   \*   \*   \*   \*

“Not only is the apparatus of sexual excitement in women more complex than in men, but—in part, possibly as a result of this greater complexity—it much more frequently requires to be actively aroused. In men tumescence tends to occur almost spontaneously, or under the simple influence of accumulated semen. In women, also especially in those who live a natural and healthy life, sexual excitement also tends to occur spontaneously, but by no means so frequently as in men. The comparative rarity of sexual dreams in women who have not had sexual relationships alone serves to indicate this sexual difference. In a very large number of women the sexual impulse remains latent until aroused by a lover's caresses. The youth spontaneously becomes a man; but the maiden—as it has been said—“*must be kissed into a woman.*”

One result of this characteristic is that, more especially when love is unduly delayed beyond the first youth, this complex apparatus has difficulty in responding to the unfamiliar demands of sexual excitement. Moreover, delayed normal sexual relations, when the sexual impulse is not absolutely latent, tend to induce all degrees of perverted or abnormal sexual gratification, and the physical mechanism when trained to respond in other ways often fails to respond normally when, at last, the normal conditions of response are presented. In all these ways passivity and even aversion may be produced in the conjugal relationship. The fact that it is almost normally the function of the male to arouse

the female, and that the greater complexity of the sexual mechanism in women leads to more frequent disturbance of that mechanism, produces a simulation of organic sexual coldness which has deceived many.—*Havelock Ellis*.

\* \* \* \* \*

In an instructive article ("Why Girls Go Wrong," *Ladies' Home Journal*, January, 1907) B. B. Lindsey, who, as judge of the Juvenile Court of Denver, is able to speak with authority, brings forward ample evidence on this head. Both girls and boys, he has found, sometimes possess manuscript books in which they had written down the crudest sexual things. These children were often sweet-faced, pleasant, refined and intelligent, and they had respectable parents; but no one had ever spoken to them of sex matters, except the worst of their school-fellows or some coarse-minded and reckless adult. By careful inquiry Lindsey found that only in one in twenty cases had the parents ever spoken to the children of sexual subjects. In nearly every case the children acknowledged that it was not from their parents, but in the street or from older companions, that they learned the facts of sex. The parents usually imagined that their children were absolutely ignorant of these matters, and were astonished to realize their mistake; "parents do not know their children, nor have they the least idea of what their children know, or what their children talk about and do when away from them." The parents guilty of this neglect to instruct their children are, Lindsey declares, traitors to their children. From his own experience he judges that nine-tenths of the girls who "go wrong," whether or not they sink in the world, do so owing to the inattention of parents, and that in the case of most prostitutes the mischief is really done before the age of twelve; "every wayward girl I have talked to has assured me of this truth." He considers that nine-tenths of school-boys and school-girls, in town or country, are very inquisitive regarding matters of sex, and, to his own amazement, he has found that in the girls this is as marked as in the boys.—*Ladies' Home Journal*.

\* \* \* \* \*

It were idle to talk of "reforming" women who never possessed the faintest conception of modesty; in whom the brutish nature dominates the divine; but these form a very inconsiderable portion of that vast array upon whose brows blazes the scarlet

brand of the courtesan. A vast majority of these unfortunates feel their degradation as no male malefactor ever felt his disgrace; would, were it possible, wash the stains from their souls with their heart's blood. Every year of the world thousands of them, unable further to bear their weight of shame, longer to endure the fierce scourgings of the fire-whips of an avenging conscience, burst the gates of death, hide in the grave from a cold world's bitter scorn. Other escape there is none; Society will not receive them back, its doors are irrevocably closed to them. They may knock, but it will not be opened unto them; they may come on their knees, groping their way through penitential tears, but they will be spurned from its portals with foul reproach. Society made them what they are; it now sits in judgment upon them and declares that they shall be no other. From the lips of the stern judge are never heard those words, the sweetest that ever fell on mortal ears, divinest sentence that ever passed the lips of God or man, "Go and sin no more!" Other criminals reform. The thief becomes an honest man; the forger lives down his crime; the manslayer purifies his bloody hands with a life-time of noble deeds; but once a courtesan always a courtesan. There is no place in all the wide world but the bagnio for the woman who has once erred—no matter how youthful or inexperienced, how foul her betrayal.—*Brann—The Iconoclast.*

\* \* \* \* \*

*Dangers of Masturbation Greatly Exaggerated.*—The dangers of masturbation have been greatly exaggerated. Chiefly since the publication, at the end of the eighteenth century, of Tissot's book on masturbation, but to some extent also even earlier, it has been usual to refer to masturbation the occurrence of innumerable diseases, including mental disorders and locomotor ataxia. I do not propose to reproduce the account given by Tissot, and after him by Hufeland, and also by the innumerable quacks and swindlers who trade in the "cure" of "secret diseases"—these latter, preying upon the fears of humanity, declare that every possible affliction in both sexes may result from masturbation, and recommend innumerable miraculous remedies for these often imaginary ills. Disorders and displacements of the womb, ulcers, and cancer, gastralgia and gastric spasms, jaundice, pains in the nose, are supposed in women to result from masturbation, as well as "the whites," nymphomania, etc. There



is hardly a single organ of the body of which disease and destruction have not by man been referred to masturbation. In reality all this is false. It is more than doubtful whether, as far as adults are concerned, occasional masturbation is necessarily more harmful than normal sexual intercourse. According to my own observations, the principal question is whether, in masturbation, the bodily and mental stimuli employed to obtain sexual gratification involve an especial shock to the nervous system—a greater shock than results from normal sexual intercourse. More powerful shock may, indeed, arise from the fact that the masturbatory act is apt to be repeated with excessive frequency; and we have to admit that the chief danger of masturbation lies in the fact that there is so grave a risk of sexual excess.—*Dr. Albert Moll.*

\* \* \* \* \*

Consider the controversy that has raged with regard to the providing of prophylactic outfits to our men in the army and navy. One would think this was a simple matter. Precautions taken before, or within a short time after contact, enormously lessen the dangers of infection. And yet prophylaxis is objected to on the grounds that it is immoral, that it invites to sexual indulgence by providing immunity from infection. It is also held to give rise to a false security.

Really, it is difficult to have patience. Huge sums are being spent in treating these diseases after they have been contracted, but we must not give our young men the means whereby they may be prevented from being contracted. Such miserable prejudice would be funny, unless one remembers the unconscious cause which gives it so burning a strength.

During the War I attended a conference to protest against the giving of prophylactic outfits to the overseas troops. It was called and conducted by ladies, the incarnation of all the virtues, effervescing in the most appalling sentimentality I have ever come across, even at meetings of women met to discuss the morals of men. Interminable floods of gush! They talked of nothing but purity, its beauty, its healthfulness, its moral uplifting to the soul of the young man—its devil knows what! Venereal diseases were Nature's punishment for impurity; to provide prophylaxis was to insult the pure youth, to hurry on to sin the youth who was not pure. Such was the pleasing doctrine slowly and solidly

defended, while the real problem of how to prevent the spread of venereal diseases—especially how to stop the birth of infected children, was lost in white clouds of virtue. And many of these women themselves were mothers! When I remonstrated, attempted to show that the one fact to go for was the prevention of infection as in that way only could the spread of the plague be stayed and the innocent saved from suffering with the sinner, I was charged, denounced, and cut to pieces. I am sure that every one of those good women pitied me—as a matter of fact, one speaker said frankly that she was very sorry for my son; plainly they were very doubtful of my virtue.—*Mrs. C. Gasquoine Hartley.*

\* \* \* \* \*

It is thus a result of the complexity of the sexual mechanism in women that the whole attitude of a woman toward the sexual relationship is liable to be affected disastrously by the husband's lack of skill or consideration in initiating her into intimate mystery. Normally the stage of apparent repulsion and passivity, often associated with great sensitiveness, physical and moral, passes into one of active participation and aid in the consummation of the sexual act. But if, from whatever cause, there is partial arrest on the woman's side of this evolution in the process of courtship, if her submission is merely a mental and deliberate act of will, and not an instinctive and impulsive participation, there is a necessary failure of sexual relief and gratification. When we find that a woman displays a certain degree of indifference in sexual relationships, and a failure of complete gratification, we have to recognize that the fault may possibly lie, not in her, but in the defective skill of a lover who has not known how to play successfully the complex and subtle game of courtship. Sexual coldness due to the shock and suffering of the wedding night is a phenomenon that is far too frequent. Hence it is that many women may never experience sexual gratification and relief, through no defect on their part, but through the failure of the husband to understand the lover's part. We make a false analogy when we compare the courtship of animals exclusively with our own courtships before marriage. Courtship, properly understood, is the process whereby both the male and the female are brought into that state of sexual tumescence which is a more

or less necessary condition for sexual intercourse. The play of courtship cannot, therefore, be considered to be definitely brought to an end by the ceremony of marriage; it may more properly be regarded as the natural preliminary to every act of coitus.—*Havelock Ellis.*

\*   \*   \*   \*   \*

Physicians make a specialty of diseases of the eye, diseases of the nose and throat, diseases of the stomach, etc.—why not make a separate and important specialty of diseases of the sexual system? Is it perhaps because diseases of the sexual system are less “serious” and cause less suffering? Then listen to what I have to say: As to life they are less serious; but as far as suffering is concerned, *I declare emphatically that there is not a disease or a whole class of diseases which is responsible for so much suffering, so much misery, so much heart-breaking as are the diseases of the sexual system—and I do not except tuberculosis.* Only the suffering is of a different character.

Do you see yon disrupted home, where love and peace reigned before and hell is reigning now? Do you see that business man who is steadily and unexplainably losing his grip on the details of his affairs, is losing his appetite and his sleep and will soon have to be sent up to a sanitarium for repairs? See you that refined woman who has every material comfort imaginable and is nevertheless wasting away, becoming pale, irritable, melancholic and will soon be—if nothing is done to help her—a confirmed hypochondriac? Do you see that wan-looking bookkeeper who, formerly an expert, is now unable to keep a position for any length of time because he is mixing his figures so? Do you see that bright young boy who is losing both brightness and flesh to such an extent that the parents are afraid he is running into consumption? And how about that sweet young girl who was obliged to give up college for reasons that nobody could explain? And those hundreds of divorced couples? *All this unspeakable misery and suffering due to disorders of the sexual system!* And the pity of it is, that all of it, or the greater part of it, could have been avoided if not for two things—if the patients had not been afraid, *ashamed* to ask for advice, and if the physicians were not so densely ignorant of the subject of sexual disorders.—*Dr. William J. Robinson.*



*Needless Waste of Little Lives.*—A portion of infant and child mortality represents, no doubt, the lingering and wasteful removal from this world of beings with inherent defects, beings who for the most part ought never to have been born and need not have been born under conditions of greater foresight.

These, however, are the merest small fraction of our infant mortality. It leaves entirely untouched the fact that a vast multitude of children of untainted blood and good mental and moral possibilities, as many perhaps as one hundred in each thousand born, die yearly through lack of sufficient food, lack of sufficient good air and lack of sufficient attention.

The plain and simple truth is that they are born needlessly. There are still far too many births for our civilization to look after adequately; we are still unfit to be trusted with a rising birth rate.

These poor little souls are born amid tears and suffering; they gain such love as they may; they learn to feel and to suffer; they struggle and cry for food, for air, for the right to develop; and our civilization at present has neither the courage to kill them outright quickly, cleanly and painlessly, nor the heart and courage and ability to give them what they need.

They are overlooked and misused, they go short of food and air, they fight their pitiful little battle for life against the cruelest odds, and they are beaten. Battered, emaciated, pitiful, they are thrust out of life, borne out of our regardless world, stiff little life-soiled sacrifices to the spirit of disorder against which it is man's pre-eminent duty to battle.

There has been all the pain in their lives, there has been the radiated pain of their misery, there has been the waste of their grudged and insufficient food and all the pain and labor of their mothers, and all the world is the sadder for them, because they have lived in vain.—*H. G. Wells.*

\* \* \* \* \*

*The Stork Story.*—It is not possible in our life to speak the truth always and unconditionally, but this fact does not give us the right to lie to children without good cause. Especially dangerous is it to relate to children fables about the stork or the cabbage-garden, at a time when they have long been enlightened about sex from other sources. I recall the case of a girl seven

years of age, whose mother was still in the habit of telling her that babies were brought by the storks; but this child was accustomed to join with other girls and boys in playing at "father, mother and midwife," wherein they displayed a comparatively exact knowledge of the processes of reproduction and birth. We are not surprised when a woman tells us that as a child her confidence in her mother was seriously shaken from the moment when she was enlightened by others concerning the sexual life, and she recognized that what her mother had told her about the matter was quite untrue. I do not mean to imply that stories of the stork and cabbage-garden variety are to be altogether excluded. It would be as reasonable to prohibit all kinds of fairy tales. Some tell us that we should tell children fairy stories only so long as they regard the whole of Life as a fairy tale. But in view of the vivid imagination of childhood, no such sharp distinction is practicable. Let the reader recall his own childhood. Does the child regard the fairy tale as a lie, even after he has begun to doubt if the world of fairy stories has any actual existence? Certainly not! Similarly with regard to the stork fable. I consider that the complete suppression of this fable, unless we replace it with some like poetical fancy, can do nothing but harm to the child's nature. All that we must ask is that such a story shall not for too long be put before the child as fact. When the child's development has gone far enough, it will be well to dispense with the stork story.—*Dr. Albert Moll.*

\* \* \* \* \*

The most usual consequences of abstinence in man are heaviness of the extremities, pains and pressure of the head, especially the back of it, which is congested, backache, anxiety, depression, weakness, general malaise, want of appetite, flatulence and diarrhea, pains in the testicles, which are swollen and tender, bad dreams and poor sleep, which gives no recreation, aversion to, distaste for work, etc. Altogether too long abstinence, causes a state of insensibility of the sexual organs, which may lead to impotency. In accordance with Lallemand, the celebrated Englishman, Dr. Erichsen declares: "That spermatorrhea is caused by continuous efforts to suppress the sexual appetite through a life of forced or unavoidable abstinence." The chastity, peculiar to some ascetics and other abstinent men, has not depended upon

moral principles, but has often been the consequence of sexual weakness, caused by debility of the generative parts, spermatorrhea, atrophy of the testicles, etc.

Complete destruction of the sexual function often follows upon early irritability of the sexual organs, caused by abstinence. One cannot then speak of Chastity when the "dead" generative apparatus excites "no temptation," and one cannot speak of Virtue when the moral will-power is unnecessary to overcome outside temptations. Abstinence cannot to a great length be endured without such a dissolution, except when a man has a weak constitution or never has had a strong sexual instinct.

The defenders of absolute abstinence may certainly put forth men, who without ever having had intercourse, enjoy good health. The question in such cases is whether they have told the truth, or if their health has been good, etc., as most men at least sometimes have given away to sexual temptations by masturbation, if they have not had intercourse with a woman. A healthy appearance is often deceptive and may conceal many functional disturbances or the health may continue good for some time, but who can promise that it will do so in the future, if abstinence is continued? To begin with only the overfulness of the seminal vesicles is relieved by pollutions, but later weakness appears, with spermatorrhea, impotency, dullness, headache, etc.—*Dr. Anton Nyström.*

\* \* \* \* \*

*The Continence Advocates—Who They Are.*—Those who preach absolute continence from illicit intercourse at all hazards, under all circumstances, belong to two classes: (1) Those who do so from a religious or moral point of view; and (2) Those who claim to be free from the theologic or moralistic bias, and base their advocacy on presumably purely hygienic grounds. With the first class we have no quarrel; a religious or moral code admits of no argument. You believe a certain way, and that's all there is to it! But with the people of the second class I do have a quarrel, for while pretending to speak as scientists and hygienists, if you examine their arguments you will at once discover the theologic or conventional twist. Let us be honest, and let us not mix or confound theology or a man-made morality with biologic necessity. As far as my personal experience goes, the men who preach absolute continence to the young generation



at all costs belong to either one or several of the following categories:

1. Men with a congenitally weak or absent sexuality. 2. Old or middle-aged men who have become sexually impotent, and who have forgotten that they ever were young and that red blood ever coursed in their veins. 3. Men who have married at a very early age. 4. Men who, while believing in the sexual necessity, still think that the danger of venereal infection and of moral degradation is so great that it overshadows the possible harm of continence, and that public policy and the good of the rising generation therefore demand the advocacy of continence. 5. Simply and plainly hypocrites, who while preaching continence from the platform, lead a very free and active sexual life. To this class belong some of the professional lecturers who are expected to preach in a certain way at so much per lecture. The people of category five need not be taken into consideration, as they are unworthy of respect. The men of the first four categories are perfectly sincere in their opinions, but those belonging to categories one, two and three are not competent judges in the matter.—*Dr. William J. Robinson.*

\* \* \* \* \*

*Sexual Anesthesia or Congenital Absence of the Sexual Sense and Appetite.*—Sexual sensations are so intimately connected with the sexual appetite that it is difficult to separate them. No doubt in the adult a certain degree of sexual appetite may exist without any voluptuous sensation, but this is a secondary phenomenon.

Complete sexual anesthesia is very rare in man, it is not a special form of anomaly, but the reduction to zero of a normal sensation and the appetite which corresponds to it. The characteristic feature of these cases is that, contrary to what occurs in eunuchs and cryptorchids, not only testicles, but all the correlative sexual attributes (the beard, voice, character, etc.) are normally developed, and are in no way inverted as in homosexual individuals. Sexual anesthesia causes no more suffering than color-blindness, but like the latter it occasions individual trouble resulting from misunderstanding. *The sexual anesthetic, having a more or less false idea of marriage, often marries in complete ignorance, and the results are then disastrous, thanks to our laws and customs.*

In women sexual anesthesia is very common. Krafft-Ebing is wrong in maintaining that in all such cases the women are always neurotic. A number of absolutely normal and intelligent women remain all their life completely cold from the sexual point of view, apart from the normally passive character of the female sex in coitus. It is rather the very libidinous woman who is pathological.

We have seen that the normal sexual sentiment of woman is developed rather in the direction of love, and desire for children. Erotic men often complain of the sexual coldness of their wives, which is disagreeable to them, for pleasure in one sex excites and completes that of the other. Cold women submit to coitus as a duty, or at any rate only mentally enjoy their husband's caresses.

Sexual anesthesia occurs normally in old age. It may occur at an earlier age, owing to destruction or atrophy of the sexual glands, great excesses, or on the contrary, extreme continence. Certain diseases and psychoses may also cause it.—*Dr. August Forel.*

\*   \*   \*   \*   \*

Natural functions and demands make the foundation for sexual feelings. They belong to human nature, but not as sinful feelings, *i. e.*, if they do not murder all that is noble in man—and if they are not signs of a low appetite. They are also of the utmost importance for the happiness of mankind and the preservation of humanity and are thus legitimate and necessary. Man would be abnormal without them. Humanity cannot exist without love, beauty, pleasure and joy.

Far from being immoral, the sexual sense is in itself moral, if it is held within proper limits and injures no one.

It is immoral to try to prevent normal activity, even though it is done under well-meaning and grand promises of happiness in another life. One can expect the greatest usefulness for public welfare from happy, powerful and healthy people. We should therefore endeavor to further happiness and by no means resign it to the "vale of tears," but try to remove and lessen misfortunes, sufferings and disharmonies, which only reduce energy and love of life. Moral education is that which furthers a liberal, uniform and harmonic development of all inner forces, and immoral education is that which disturbs this harmony.

Educators must consult Nature, not to try to remould it. Liberty must be the ruling principle of educators. The intellect must be freed, it must judge freely and not be commanded by fixed, subjective opinions and dogmas. Nature develops an infinite multitude of forms the higher it rises, and it reaches the highest multitude in the sensual world. The secrets of Nature are far from explanation and only an objective, unprejudiced investigation can trace them.

To set down a fixed opinion of the misery and sinfulness of natural man after imaginary dogmas, when one lives according to Nature, is sin against her. Many a one, who does not lead a pure life after the notions of asceticism, may be a noble and altruistic man, while many a puritan is cruel and inhuman.

Many are born with strong natural desires, but are virtuous as they know how to rule and ennoble themselves, while many puritans are really not virtuous, as they, from birth, have never had a single sexual desire to resist.—*Dr. Anton Nyström.*

\* \* \* \* \*

*Masturbation a Cause of Sexual Anesthesia.*—In many cases it has seemed to me that masturbation, when practiced in excess, especially if begun before the age of puberty, leads to inaptitude for coitus, as well as to indifference to it, and sometimes to undue sexual irritability involving premature emission and practical impotence. This is, however, the exception, especially if the practice has not been begun until after puberty. In women I attach considerable importance, as a result of masturbation, to an aversion for normal coitus in later life. In such cases some peripheral irritation or abnormal mental stimulus trains the physico-sexual organism to respond to an appeal which has nothing whatever to do with the fascination normally exerted by the opposite sex. At puberty, however, the claim of passion and the real charm of sex begin to make themselves felt, but, owing to the physical sexual feelings having been trained into a foreign channel, these new and more normal sex associations remain of a purely ideal and emotional character, without the strong sensual impulses with which under healthy conditions they tend to be more and more associated as puberty passes on into adolescence or mature adult life. I am fairly certain that in many women, often highly intellectual women, the precocious excess in masturbation has been a main cause, not necessarily the sole efficient



cause, in producing a divorce in later life between the physical sensuous impulses and the ideal emotions. The sensuous impulse having been evolved and perverted before the manifestation of the higher emotion, the two groups of feelings have become divorced for the whole of life. This is a common source of much personal misery and family unhappiness, though at the same time the clash of contending impulses may lead to a high development of moral character. When early masturbation is a factor in producing sexual inversion it usually operates in the manner I have here indicated, the repulsion for normal coitus helping to furnish a soil on which the inverted impulse may develop unimpeded.—*Havelock Ellis*.

\*   \*   \*   \*   \*

*Results of Ignorance of Personal Hygiene.*—Another thing which affects the womb is retention of urine, *i. e.*, keeping the bladder full. Many girls have been brought up in such ignorance and under such false ideas of prudery that they will suffer pain from distention of the bladder rather than allow the slightest hint to escape them that they need immediate relief. This brings about not only a weakness of the bladder, which will in later life be very annoying and really embarrassing, but the pressure of a full bladder on the surrounding parts—the womb and its attachments—is apt to displace it and irritate it. Then again, a girl may be within a few days of her flow, and here the pressure of a full and hard bladder may set up an inflammation and bring on the period before its time. All this tends to start an irregularity, and when this irregularity is fairly established, the girl's, and later on the woman's, life is only an existence full of misery.

*In fact, I think I am justified in saying that ninety per cent. of the women suffering from nervousness, hysteria, restlessness and pain, comes from the sexual organs being out of place, twisted, early inflammations and general lack of care of them from want of knowledge.*

And it is so easy for a girl to grow into complete womanhood, full of life, good health and scarcely any unnatural knowledge that she has ovaries, womb or breasts. Most women today only know they have a womb from the severe pains and that "bearing down" feeling about which they constantly complain.

Those dragging pains in the small of the back so many suffer from during the menstrual flow, and those racking headaches, are not natural. The pains mean that the womb is dragging or else pulling upon its supports; that you need to rest and keep off your feet as much as possible.—*Dr. Wm. Lee Howard.*

\* \* \* \* \*

*Recently*, a woman standing high in the social circles of her city crossed off the names of two young men from her invitation list. The action was bound to be noticed, and it was. Several friends went to her and pleaded for the young men. "Of course it is unfortunate," they argued, "that they are not just what they should be, but you are very likely to drive them farther toward ruin by your action in so publicly calling attention to their habits by excluding them from your social affairs." The social leader listened. "No!" she said, firmly, "you are wrong. We have all been wrong in opening the doors of our houses to them. I warned both of them that I would do this if they did not mend their ways; and, while they listened respectfully, they went right on. For the sake of my own two daughters, and the daughters of other mothers who come to my house, my doors are closed to them." The woman's stand had the effect of helping more timid and wavering mothers, and before the season was over practically every door was closed to the young men.

If all women would unite in taking the stand adopted by this social leader toward male sexual sinners, the most damnable feature of our civilization, the double standard of morals, which makes a woman an outcast for the immorality which is overlooked in a man, would soon be a thing of the past.

Are the effects of impurity in a man less disastrous than in a woman? Is there any sex in principle? Is there any reason why a man should have license to drag himself through licentious mire any more than a woman? A thousand times, No! It would be loosening the very foundations of Virtue to countenance the notion that, because of the difference in sex, men are at liberty to set morality at defiance and to do with impunity that which, if done by women, would stain the latter's character and make them outcasts forever. All right-minded people must agree with Angelina Grimke Weld that "whatever is morally

right for a man to do is morally right for a woman to do; I recognize no rights but human rights."

It is because human rights have been ignored in the past, because one sex has arrogated all rights, all power, to itself, and dominated the other sex, that we have the absurd and monstrous paradox of a double standard of morals.—*Rev. Orison Swett Marsden.*

\* \* \* \* \*

*Jealousy in Woman.*—Other irradiations of love in woman are similar to those of man. Jealousy is perhaps not much less developed in woman than in man. It is less brutal and violent but more instinctive and persevering; it manifests itself by quarrels, needle pricks, chicanery, petty tyrannies and all kinds of tricks which poison existence as much as man's jealousy, and are quite as inefficient against infidelity. In the highest degree of passion the jealous man uses violence or resorts to firearms, while the woman scratches, poisons or stabs. Among savages, jealous women bite off their rivals' noses; in civilized countries they throw sulphuric acid in the face. The object is the same in both cases, to disfigure.

Amorous illusions produced in woman by the sexual appetite are analogous to those of man, but are modified by feminine attributes. It is the same with hypocrisy. The passive rôle of woman in sexual life obliges her only to betray her feelings to the object of her desires in a reversed and prudent manner. She cannot make advances toward man without contravening the conventions and risking her reputation. She therefore has to be more skilful in the art of dissimulation. This gives us no right to accuse her of falseness, for this art is natural, instinctive and imposed by custom. Her desires for love and maternity unconsciously urges her to make herself as desirable as possible to man by her grace and allurements. Her stolen glances and sighs, and the play of her expression serve to betray her ardor as through a veil. Behind this furtive play, especially calculated to excite the passions of man, are hidden, in the natural and good woman, a world of delicate feelings, ideal aspirations, energy and perseverance, which are much more loyal and honest than the motives revealed by the more brusque and daring manner in which man expresses his desires. The fine phrases by



which man's love is expressed generally cover sentiments which are much less pure and calculations much more egoistic than the relatively innocent play of the young girl. No doubt there are false women whose amorous wiles are only a spider's web, but we are speaking here of the average, not of the exceptions.—

*Dr. August Forel.*

\* \* \* \* \*

*Length of Engagements.*—The question is often asked, "Are long or short engagements better?" We unhesitatingly reply, as a rule, the short engagement is preferred, the long one to be avoided, but here as elsewhere, there are exceptions. Where two young people feeling they are or will be unfitted for marriage for many years, and yet feeling certain that they are mates, having their futures before them with problems unsolved and difficulties to be met and conquered, feeling they need each other's pledge like anchors to the soul, we should not discourage an engagement under those circumstances. But when the parties are much together there will be an interchange of affectionate endearments, the kiss, the embrace and the ardent lover's kiss in time inflames the passion of his mistress, he being man finds his heart like Vesta's altar—the fire forever burns.

Temptation, therefore, of the sharpest sort comes, and being tempted, both thinking they are to live forever with the other anyway, what wonder that long engagements often provoke fornication, in many cases betrayal, by giving or taking all the privileges of marriage. In Europe the engaged girl is safeguarded, chaperoned continually, in fact, a system of rigorous espionage is instituted to prevent this very thing. Not so with us. Each has unrestricted access to the other, both are left upon their honor, and it is not the honor that fails so much as their strength. A thousand times better to have a short and chaste engagement, to save all these delights until sanctified by marriage rites, then there will be no fearful hours of waiting, no anxious dread at each approaching period. Many a girl has become an invalid and her strength wasted in watching for those monthly signs, sometimes delayed until fear and hope and nameless dread have alternated to the breaking down of health and the wasting of her moral powers. The best way is to keep perfectly free in mind and conscience by chaste demeanor. Omit

all loving dalliance that fires the passion, for one of three things is a necessity: The sin that I have mentioned, broken health from unsatisfied passion or masturbation, with its train of evils often continuing after the consummation of the marriage rites.—*Evangelist M. B. Williams.*

\* \* \* \* \*

*Awful Results of Masturbation, Exaggerated.*—The opposing views on the subject (masturbation) may be simply explained by the fact that the writers on both sides have ignored or insufficiently recognized the influence of heredity and temperament. They have done precisely what so many unscientific writers on inebriety have continued to do unto the present day, when describing the terrible results of alcohol without pointing out that the chief factor in such cases has not been the alcohol, but the organization on which the alcohol acted. Excess may act, according to the familiar old-fashioned adage, like the lighted match. But we must always remember the obvious truth, that it makes a considerable difference whether you threw your lighted match into a powder magazine or into the sea.

While we may thus dismiss the extravagant views widely held during the past century, concerning the awful results of masturbation, as due to ignorance, and false tradition, it must be pointed out that, even in healthy or moderately healthy individuals, any excess in solitary self-excitement may still produce results which, though slight, are yet harmful. The skin, digestion, and circulation may all be disordered, headache and neuralgia may occur; and, as in normal sexual excess or in undue frequency of sexual excitement during sleep, there is a certain general lowering of nervous tone. Probably the most important of the comparatively frequent results—though this also arises usually on a somewhat morbid soil—is neurasthenia with its manifold symptoms. There can be little doubt that the ancient belief, dating from the time of Hippocrates, that sexual excesses produce spinal disease, as well as the belief that masturbation causes insanity, are largely due to the failure to diagnose neurasthenia.—*Havelock Ellis.*

\* \* \* \* \*

*Seminal Emissions.*—During puberty many changes take place in the boy, such as change of voice, the growth of hair on the face, various parts of the body, and most important, the

*discharge of the sexual fluid commonly known as seminal emissions.* This latter symptom appears in every normal healthy boy on reaching the age of puberty, but unlike the menstrual period which occurs at a stated period in girls, the seminal emissions do not depend upon a special period; they occur at different times. Unlike menstruation, which in the girl lasts from two to seven days, the discharge lasts only a few seconds, and is not accompanied by pain. This expulsion is considered perfectly normal, and is not a sign of physical or sexual weakness, but a sign that a surplus accumulation of ripe sex cells are present and have come to their full development and overflow. Nature takes care of this and uses all of this life-giving fluid according to the needs of the individual, casting off the surplus.

It is this symptom that alarms young boys at puberty. It is this overflow which enables quack doctors to play upon the innocent and ignorant boy, telling him that it is an indication of weakness. And it is also this as the result of telling older boys about it that leads boys to houses of prostitution; for they are told by their ignorant advisers that they must have sexual relations or endanger their sexual capacity.

It is also this overflow which, occurring in sleep awakens the boy, and he is conscious of what has occurred; he is conscious also of a pleasurable sensation which this sense of relief produces, and unless warned against it he will try at some later time to bring on this relief by friction or mechanical means, which is known as masturbation—often called “self-abuse.” The age of puberty is one of the periods in an individual’s life in which it is easiest to acquire this habit, in girls as well as in boys, although the girl may not be conscious of any sensation, through the accumulation of the “detumescence.” Yet there is the same nervous tension that exists in boys, due to congestion of the not fully developed genital organs, perhaps slight in intensity, but it is there and the girl becomes conscious of it.—*Mrs. Margaret H. Sanger.*

\* \* \* \* \*

*Heredity.*—The doctrines of heredity, are, of course, combated by many, but no man ever thought of combating them when applied to his kennels, chicken-coop or pasture. He will send his favorite bitch a thousand miles to some particular dog; and will pay the heaviest kind of fee that his mare may be put to



a record-breaking stallion; he will spend his life trying to improve the breed in a single strain of poultry that he may produce one extra egg per month; or in breeding a horse that will break all previous records, and not give an hour of serious or honest thought to his bedroom or the scientific breeding of children. He will choose the mate who delights his eye, who brings him a fortune, or one whom he thinks will keep his stockings darned, or his trousers patched, or his stomach fed, or who appeals to his lustful fancy; but the thought of scientific marriage never enters his mind, and when he has won her, children are begotten, or, rather, they happen; they are not brought up, they come up, and he is quick to charge all failures to Providence, while taking credit to himself for any successful or fortunate result.

Often children are conceived on the wedding night in the midst of its lust and fears, its mingled fright and joy, as the result of one of its sensual acts oftentimes repeated *ad infinitum ad nauseam*. It is a fortunate provision of Nature, however, that this act often repeated at short intervals robs the semen of its spermatozoa. If that were not so, we would probably have a puny, attenuated race. No act requires so much of careful, prayerful, thoughtful preparation as the propagative act. Do not think I am overstating this; let me repeat again that even now nearly one-half of all the children born die before they are five years old, and more than half of this number before they are two years old. Do we need more startling figures to show how unfitted most children are for the battle of life?—*Evangelist M. B. Williams*.

\* \* \* \* \*

*The Ignorance of Parents.*—When the boy arrives at the age of puberty, he is in greater danger than a girl of being not only led astray by companions, but being actually sent into unclean living by those nearest and most interested in his welfare—HIS PARENTS. The reason of this is that there has been and still is a false idea clinging to many parents that as soon as the boy has seminal emissions, it is a signal that he must have sexual relations or suffer in health. That the seminal emissions are not harmful and that they grow less frequent as the boy grows older is a fact of which few mothers seem to be aware. We cannot blame the mothers of the past for not informing their sons

of this physical condition, for few of them knew it themselves. Mothers have been as ignorant as the boys of their sex functions as well as other functions of the body. They accepted sickness, disease, and even death without a question, placing their faith and confidence entirely in the hands of the medical profession, who, like the rabbis and high priests, made a church of their knowledge.

Fortunately, this condition of affairs is changing, and the knowledge of the human body, which for ages has been most carefully locked within the medical libraries, is fast taking up its abode in the homes of the people—where it belongs.

Only a few weeks ago I had occasion to talk to a woman about her oldest son, whom I considered sick from overwork and lack of nourishment. She informed me, however, that this was not so, and whispered confidently that he was 16 years old and “in that age when he needs a woman.” She further remarked that she and “the papa” had talked it over with the result that the father told the boy, when he had “the desire for a woman,” that he, the father, “would give him money enough to get one.” Think of that boy’s attitude toward women, and the danger to become affected with venereal diseases that he was likely to contract! Yet both parents had the sincerest wish to do their best for that boy; they give the best advice they knew.—*Mrs. Margaret H. Sanger.*

\* \* \* \* \*

*Sexual Power.*—The individual variations in the sexual instinct are enormous, and may be said to vary from zero to an intense and perpetual excitation called *Satyriasis*. By sexual power is understood the faculty of accomplishing coitus. This power in the first place requires strong and complete erections, as well as the faculty of following them by frequent seminal ejaculations, without being precipitate. Impotence or incapacity for coitus belongs to pathology and consists usually in the absence or defectiveness of erections. Sexual power and appetite generally go together, but not always, for it is possible to be powerful with feeble sexual appetite, and intense appetite sometimes goes with impotence; the latter condition, it is true, is pathological. Sexual power also varies so much in individuals that it is hardly possible to fix a limit between the normal and the pathological.

The sexual power and appetite in man are strongest on the average between 20 and 40 years, especially between 25 and 35. But, while young men of 18 to 20 years or more may be still tranquil, without having had seminal ejaculations, one often finds, among races who mature earlier, boys of 12 or 16 who are fully developed both in sexual power and appetite. In our Aryan races, however, when this occurs before the age of 14, it is a case of pathological precocity. The late appearance of sexual power and appetite is rather a sign of strength and health.

After the age of 40, the sexual power slowly diminishes, and after the seventieth year, or even before this, becomes extinct. Exceptionally one finds old men of 80 who are still capable. Normally the sexual appetite diminishes with age; often, however, especially when it is artificially excited, it lasts longer than sexual power.

As regards sexual power we must distinguish between that of copulation and that of fecundation. The power may exist without the latter, when the testicles have ceased to functionate, while the other glands, in particular the prostate, second the venereal orgasm by their secretion, when the power of erection is still preserved. Inversely, the testicles may contain healthy spermatozoa in the impotent.—*Dr. August Forel.*

\* \* \* \* \*

*Ignorance and Innocence or Intelligence and Virtue.*—Reason is still fighting prejudice as to which is the better method of conserving the purity of young girls and young women, to leave them in complete ignorance of everything pertaining to sex, or to instruct them in the science of sexual functions and relations. Most schools will have nothing to do with such instruction; the majority of parents are equally opposed to it, fearing to rob the innocent girl of her sweet simplicity. But there are few girls who, having arrived at puberty, are not in possession of some sort of knowledge of sexual matters, knowledge calculated rather to excite prurience than help them to preserve purity of mind.

So perverted is the popular imagination that it is actually considered to be more in keeping with morality that a young couple be enticed into union—provided, of course, that such a union be properly registered—simply and solely for the purpose of gratifying their sexual instinct, after the manner of animals.



That their union may result in the propagation of offspring is quite a secondary consideration—it is nearly always regarded as a probable result; rarely, if ever, as the purpose. To take any precaution to ensure good quality in any eventual offspring by seeking to acquire reliable information concerning sexual matters so that the health and vigor of the organs may be preserved and promoted so that they may be fit for their purpose is considered indelicate, even indecent.

Such is the only logical conclusion to which we can come when we take into account the popular idea that, in sexual matters at least, *ignorance and innocence are more desirable than intelligence and virtue*. That woman is more subject than man to ill-health is not a consequence of Divine wrath visited upon generations of women because of the fault of one; it is merely the natural result of woman's silly habits and her improper care, or neglect, of her own body.

So childlike is our faith in old ideas that we are almost compelled to look upon the woman who is so healthy that she is never afflicted with any of the sexual disorders common to women, who bears and rears healthy children without suffering pain or injury, somewhat in the same way as the king of Egypt regarded the good fortune of Polycrates, the tyrant of Samos.—*Dr. A. A. Philip.*

\* \* \* \* \*

With the development of the other senses the sense of color is awakened in the adolescent girl. The girl, who, yesterday allowed her elders to choose clothing and colors for her, at this time becomes most exacting in her own selection of ribbons and dresses. Sunsets and forests have become beautiful, and often the girl with artistic talent decides at this age to choose her life work. Laces, jewelry, trinkets, ribbons and shop windows become her world. Indeed, so great is her desire to possess ornaments that she has been known to resort to petty thievery, when unable to avail herself of the means to obtain them otherwise. Certain authorities, who have made Vice and kindred subjects a study, assert that it is the great desire for trinkets, silk petticoats, etc., which induces girls to sell their bodies and enter prostitution. Such authorities fail to see the economic significance of these unsatisfied desires. There is something wrong with a system of Society which allows its

women to sell their bodies for such trifles, the desire for which is part of their natural development.

Is flesh and blood and the virtue of the mothers of the future so cheap in this land of plenty that it can be sacrificed for such whims? It is impossible to suppress that inherent and natural desire in the adolescent girl to adorn and beautify herself. She must and will do it.

The girl of wealth, of the so-called upper class, can beautify herself and adorn her body with the costliest jewels and fabrics. All eyes are upon her in admiration of her exquisite taste and attractive appearance. Yet this same manifestation in a working girl is condemned. Any attempt on the part of a working girl to give expression to the desire to be beautiful is considered "dangerous to her welfare," is spoken of as her "awful desire for trinkets."

The women of wealth set certain standards for themselves and their class, but separate and distinct standards for the women of the working class. It is about time the reformers and philanthropists do something other than deal with the symptoms of the great social unrest, and some of the latest reports of vice investigators have been compelled to face some of the most fundamental causes, and acknowledge these causes.—*Mrs. Margaret H. Sanger.*

\* \* \* \* \*

*Don't Misrepresent the Effects of Masturbation.*—In my opinion stigmatizing even the most moderate indulgence in masturbation as a vice, has a deleterious effect on the people who so indulge, and makes it harder for them to break off the habit. Every thinking physician and every thinking parent can tell you that picturing the masturbatory habit in too lurid colors and stigmatizing it with too strong epithets has, as a rule, the contrary effect to the one expected. The victims of the habit consider themselves degraded, irretrievably lost. They lose their self-respect and it is on account of that harder for them to break themselves of the habit.

"We will accomplish a good deal more with our youthful and older patients, if we leave alone altogether the moral side of the question and emphasize but do not exaggerate the physical injuriousness of the habit. We do not want to diminish the self-respect of our boys and girls, we want to increase it;

and we cannot do it if we make them believe that a masturbator is a vicious criminal. Inspire your patients with confidence, tell them that continuance in the habit may jeopardize their future growth, physical and mental health and happiness, and you will find it easier to handle them."

In conclusion, *I will say that I could give the life-histories of hundreds of people who, as boys, practised masturbation quite regularly and steadily, but have grown up to be healthy, energetic, successful men, the habit apparently having produced no ascertainable effect, either upon their physique or upon their mentality.*

Against the wilful misrepresentation of the evilminded nothing will avail. But to obviate any honest misunderstanding on the part of sincere seekers after truth a few words may not be out of place. This is not in justification of, much less a plea for, self-abuse. But it is a plea for a sane attitude towards a universally prevalent phenomenon, which is purely physical in character; it is a plea against senseless and injurious exaggerations, against characterization of people as criminal and vicious who at the very worst are only weak; it is a plea for fact against fancy. In short, it is a plea against driving people, through feeding them upon falsehood, into neurasthenia and melancholy, who, through the truth, can be made quickly into normal, healthy and life-enjoying men and women.—*Dr. William J. Robinson.* (See last page.)

\* \* \* \* \*

*The Double Standard.*—Virtue for the woman, impurity for the man, has been recognized by nearly all classes, and the fond and doting mother who seeks to make a match for her daughter seems no longer to demand purity on the part of the would-be husband, but instead, seems only to demand social position or a certain amount of this world's goods.

The girl is no longer taught in the home that virtue is the chief thing—save for herself; the virtue which Society imposes upon her, the strict rules of living which perhaps she will be ostracized if she break them, are not imposed upon the young man, and she comes to the marriage ceremony not with the thought that she has married a man who has been pure from his youth; who has come to the marriage altar, and who will come to the marriage bed, as virtuous as he expects his wife to be; but that he probably sowed his wild oats, and in all probabil-



ity he has a full taste, perhaps his full share of the world's pleasures, and with such foolish, wicked words as "The reformed rake makes the best husband" seeks to be content, seeks to lull herself to sweet security with the thought that even now he has tried all the pleasures of this world, that he has tried many other women and found them unsatisfactory, and at last he has decided to settle down to her, and that he will probably prove true, and remain faithful.

Of course, we can only hope that such will be the case, that the wild young man has seen the folly of his ways, that he has repented of the foolishness and of the sins of his youth, and that when he comes to marry the sweet, pure girl who has charmed his senses and captivated his heart, that he will turn no more to the devious and winding ways of Sin, but will be content with her and be glad that he has found this angel of his life.—*Evangelist M. B. Williams.*

\* \* \* \* \*

The wanton worship of the flesh has passed with the World's youth; but though much of man's crassness has been purged away in Time's great crucible, he is still of the earth earthy and clings tenaciously to his ancient prerogative of polygamy. When he marries, Society does not really expect him to respect his oath to "forsake all others"—regards it as a formal bow to the covenants, a promise with a mental reservation annex; but it considers a woman's vow as sacred and the breaking thereof as rankest blasphemy. He is allowed but one wife, but he may have a score of mistresses and Society will placidly wink the other eye—until some tearful maiden requires him to share the shame she can no longer conceal or an "injured husband" goes a-gunning. This should not be so, but so it is. There be fools, both male and female, who will rise up to exclaim that this is false; but that it is Gospel truth is proven every day in the year in every community on the American continent. Men with reputations for licentiousness that would shame old Silenus are cordially received in the most exclusive society. They are found at every "high-falutin' function," bending over the white hands of the most accomplished ladies of the land; on every ballroom floor, encircling the waists of debutantes; in the parlors of our best people, paying court to their young daughters. The noblest women in this world become their wives—fondly under-

take their "reformation" while indignantly drawing their skirts aside lest they come in contact with the tawdry finery of females whom these lawless satyrs have debauched. Of course, when a woman learns that her reformatory work has proven a failure, drear and dismal, she complains bitterly, may even demand a divorce; yet she could count upon the fingers of one hand the hubbies she would trust behind a sheet of paper with a wayward daughter. She doesn't believe a little bit in the virtue of the genus male, yet insists that her own husband be a saint—assumes that her own charms should cause him to regard all other women with indifference, and when she learns of his polygamous practices suffers all the pangs of wounded pride.—*Brann—The Iconoclast.*

\* \* \* \* \*

The ignorance of women of all that concerns the art of love, and their total lack of preparation for the natural facts of the sexual life, would perhaps be of less evil augury for marriage if it were always compensated by the knowledge, skill and considerateness of the husband. But that is by no means always the case. Within the ordinary range we find the large group of men whose knowledge of women before marriage has been mainly confined to prostitutes, and the important and not inconsiderable group of men who have had no intimate intercourse with women, their sexual experience having been confined to masturbation or other auto-erotic manifestations, and to flirtation. Certainly the man of sensitive and intelligent temperament, whatever his training or lack of training, may succeed with patience and consideration in overcoming all the difficulties placed in the way of love by the mixture of ignorances and prejudices which so often in woman takes the place of an education for the erotic part of her life. But it cannot be said that either of these two groups of men has been well equipped for a task. The training and experience which a man receives from a prostitute, even under fairly favorable conditions, scarcely form the right preparation for approaching a woman of his own class who has no intimate erotic experiences. The frequent result is that he is liable to waver between two opposite courses of action, both of them mistaken: On the one hand, he may treat his bride as a prostitute, or as a novice to be speedily moulded into the sexual shape he is most accustomed to, thus running the risk



either of perverting or of disgusting her. On the other hand, realizing that the purity and dignity of his bride place her in an altogether different class from the women he has previously known, he may go to the opposite extreme of treating her with an exaggerated respect, and so fail either to arouse or to gratify her erotic needs. It is difficult to say which of these two courses of action is the more unfortunate; the result of both, however, is frequently found to be that a nominal marriage never becomes a real marriage.—*Dr. Iwan Bloch.*

\*      \*      \*      \*      \*

*Cure of Masturbation.*—I take this opportunity of drawing attention to a method recommended by Féré for the cure of masturbation, which I have myself found of good use in several cases, but which appears to be almost entirely unknown. It is that the child addicted to masturbation during the night hours should be watched by a trustworthy person; every time the child puts its hand to its genital organs, or endeavors to stimulate these organs mechanically in some other way, the attendant must immediately intervene, and draw the hands from beneath the bed-clothing. This plan may be adopted whether child masturbates while asleep or while awake. But good can be expected from the method above all in those cases in which the child masturbates during the sleep, and in which it commonly wakes up directly it is interfered with. In most cases the children treated in this way soon give up the practice of masturbation, even though the evil is of long standing. But it will be advisable to continue to supervise the child for some time after a cure has apparently been effected, lest what may have become a nervous automatism should be resumed after a brief intermission. The chief difficulty in the practical application of this method lies in the choice of a trustworthy person to watch the child. As a rule, the mother will be the most suitable, but now and again we shall find a hired nurse to whom this extremely difficult task may safely be entrusted. In a number of cases with which I have had to deal, I have recommended the mother to undertake the duty herself, because she seemed to me the most trustworthy person available. But it is a very regrettable fact that many mothers are altogether unwilling to make the necessary sacrifice for their child's good; and most of them are quite ready to believe that some woman whom they can hire will perform



the duty which they themselves as mothers have renounced. Such lack of proper feeling is especially common among those who belong to what are termed the upper classes of society—to the aristocracy whether of birth or of wealth—whereas among the middle classes I have found mothers far more ready to make the necessary sacrifices.—*Dr. Albert Moll.*

\* \* \* \* \*

*Impotence.*— As implied by the meaning of the word, we have to deal here with loss of power—a condition in which the sexual act cannot be performed. While possible in either sex, the male is most often involved, and in addition such individuals are generally sterile as well.

The causes may be bodily or mental, among the former various deformities of the male organ prevent it from being inserted. The mental causes are rather numerous, and comprise several circumstances which may act on the mind: Among these are fear of contracting some venereal disease; fear of being detected; of causing pregnancy, and so on. Years ago a French author told about a young man who was initiated into the pleasures of Venus by a woman who disguised herself with a blond wig, and later he was impotent save with a partner in a blond wig. A mathematician in Europe had the disagreeable habit of pondering over the solution of problems in figures, and became so engrossed he was unable to secure a condition of the male organ necessary for the sexual relation. His wife was advised to ply him with wine previously and by getting him partially intoxicated, switch his mind away from figures and this worked successfully.

For women the two principal causes are deformities of the birth-canal, and great pain excited by the act.

To relieve this unfortunate failing, the first thing necessary is absolute rest of the genital apparatus for weeks and months. To avoid arousing sexual desire as much as possible, husband and wife should not share the same bed, and separate rooms, if possible, are even better.

Above all, medicines already put up and sold in drug stores, are strictly forbidden. There are several drugs which are reputed to be powerful agents for arousing sexual desire, but it is now known that none of them have any effect, even in poison-

ous doses. Nor are any of the "machines" and apparatuses of any more value. These are naturally expensive, and other things being equal—the more costly they are, the less benefit can be derived.

The individual should endeavor to keep himself in as good general health as can be done. Plenty of good, nutritious food, cold baths, prevention of constipation by appropriate diet (or if need be, injections of soapsuds or taking mild laxatives).

Great benefit is had by application of a solution of lunar caustic to the urethra near the bladder by physicians; who often prescribe the bromides to allay sexual excitement. In due time—after sufficient rest has been had—the doctor will probably advise strychnine and other tonics.

For the form affecting the mind principally—psychic or mental impotence—electricity is often very valuable.—*Dr. Wm. E. Whitney.*

\* \* \* \* \*

*To the Pure All Things Are Pure.*—If one is constantly in a nervous, erotic state, if one cannot cut off sensual thoughts and apply the mind to daily or hourly work, if—I am speaking of the fully grown man and woman—one cannot view statuary or other works of art of a nude nature without seeing Sex in its sensual aspect, then there is no stable control over sex forces. If such a twist of mentality is found in the man past active age or in maidenly women of the irritable age, it is the real "dangerous age."

Such persons see only what is in their wabbling sexual centers; the beauty of conception, the genius in working it out, its inner and moral meanings escape their mind's eye.

The man or woman who is always seeing in art or literature something injurious to the public, or can read into works of literature and drama only the immoral and sensuous, while blinded to the reasonable and natural effects of human nature as described in literature and art, is possessed of an overdeveloped sexual center in the brain, and the function of that brain, the mind, is never free from evil ideation and imputation.

The cure for these self-assumed mentors is to stop worrying about the danger to public morals and get to worrying about their own. *Only the decent-minded have the right to censor the indecent.*

The individual who would garb the statue of Venus, the male or female person who would drape every painting showing the beauty of healthy flesh and form, are in a state of chronic sensual drunkenness. Like the alcoholic victim always looking for something containing alcohol, they see something for their cravings, some suggestion or hint to satisfy an abnormal thirst in the true statements of honest writers. In the case of such women it is symptom of unsatisfied longings expressed in one of the many unrecognized forms sexuality takes under a period of long suppression. As this state continues to middle life and past, it is a fixed, cemented condition of mental and moral strabismus—cock-eyed.—*Dr. Wm. Lee Howard.*

\* \* \* \* \*

*Perverted Sexual Instinct and Marriage.*—The existence of a perverted instinct or habit in one of the married pair may cause acute distress to the other, and entirely normal, person. That abnormalities of the sex instinct are not uncommon is shown by the extensive literature on the subject, the testimony of physicians who have care of the insane, and by cases occasionally reported in the newspapers. A perversion is usually the profound secret of the person affected. There may be extreme morbidity. But the propensity is often not discovered by the other partner until after wedlock. This concealment cannot be regarded as real delicacy of feeling. It is reprehensible, and fraught with incalculable peril. Many marriages have been wrecked by this cause. Sexually inverted (homosexual) men and women sometimes marry without disclosing their abnormal impulse to their lovers. Men who crave to inflict pain (Sadism) and women or men who court physical suffering (Masochism) frequently marry unsuspecting lovers. Many of these subjects are predisposed by heredity to their perversions, while others have acquired habits by experimentation in vice. The congenital cases are heavily weighted by inheritance with impulses that they cannot control, though they may will to live normal lives, and are repelled by their own aberrant propensities. Surely, when any of these abnormal instincts exist, it is the solemn duty of the man or woman to admit them frankly to the prospective wife or husband at the outset of betrothal. In most instances these innate perversions must be rightly regarded as a barrier to matrimony with a normal partner.—*Walter M. Gallichan.*



*The Results of Sex Ignorance.*—The past faulty education of women has been a great source of evil and misery. Some appraisal of the extent of the evil can be gained from the following facts: A very large number of girls are doomed to future disease through total lack of knowledge concerning the meaning of the monthly cycle, and a want of hygienic teaching concerning it. The seeds of hysteria, neurasthenia, and other mental troubles are frequently sown in adolescence, and the whole of the future life is threatened with unhappiness or physical suffering. The attempted total repression of curiosity respecting the sexual life sets up a morbid introspectiveness, distorts the judgment, hinders moral and intellectual development, and imperils peaceful marriage. Ignorance makes the young the easy prey of the debased and the corrupting. It is one cause of the formation of auto-erotic habits which may enfeeble health during the time of growth, and become a bar to happy conjugality.

Want of sex education is a common cause of failure and tragedy for women in marital life. Many women know little or nothing of their deepest desires, idiosyncrasies, prejudices, and aversions, until they are suddenly and often irrevocably, confronted with specific difficulties arising in wedded life. For the lack of plain physiological knowledge many wives injure their health, impair their reproductive power, threaten the life of the coming infant, and cause unhappiness to their partners. Many estrangements between man and wife are traceable to ignorance of sexual hygiene, a perverted ethical attitude, a fantastic tradition, or an old wives' fable. I know only too poignantly that the ignorance of many so-called well educated people is almost incredible. In some not very rare instances grave physical injury to the wife or to the husband is due to ignorance—*Walter M. Gallichan.*

\* \* \* \* \*

*Exaggerated Statements of the Dangers of Masturbation.*—I need not describe the dangers to health resulting from masturbation and sexual excesses, but it is necessary to allude to the exaggerated statements which are sometimes encountered regarding the dangers of masturbation, especially in popular works on the subject, so that the physician may be on his guard

about this matter. A child who during and after the act of masturbation has a keen sense of wrong-doing, and consequently suffers much from self-reproach, may, if the fear is superadded of having done serious permanent injury to health, be affected with grave hypochondriacal manifestations. Many instances of this have come under my notice, in young men and young women of sixteen or thereabouts. Even when the practice of masturbation has long been discontinued, and the patient is quite grown up, such symptoms may arise, owing to the persistence of the fear of disastrous results, and the auto-suggestive influence of this fear. Nowhere is more tact required by the physician in his dealings with those who masturbate or have masturbated. There is even a real danger that a moral lecture may cause a shock to the system; in the case of some young men it may sometimes be better to acquiesce in masturbation, rather than to alarm them by talking about the disastrous consequences of the indulgence. I refer to those unfortunate creatures who suffer from severe hyperesthesia of the sexual impulse, and who for social reasons are not in a position to satisfy the impulse in any other way than by masturbation, or who refrain from illicit intercourse in the well-grounded fear of venereal infection. The physician who has seen a number of such cases, who has learned how they continually relapse into the practice of masturbation, notwithstanding all their good resolutions and their conviction that masturbation is at once dangerous and immoral, will be likely to feel that it is better, not indeed to recommend masturbation, but from time to time tacitly to permit it. To do in these cases what it is well to do in certain others, namely, to describe the bad effects of masturbation, may give rise to grave conditions of depression, and even to suicide. Certainly, in such cases, we must carefully avoid alarming the patients too seriously about the consequences of masturbation.—*Dr. Albert Moll.*

\* \* \* \* \*

The aim of eugenics is the production of a better humanity, especially by the elimination of bodily and mentally feeble stocks. With the discovery of the Mendelian law, eugenics was placed upon a scientific basis. The world knew by experience that desirable as well as undesirable traits are transmitted by heredity, but

it thought that heredity could be controlled by environment. It believed in economic determinism. Mendel's law revealed the inexorableness of the law of heredity.

The science of eugenics teaches that Nature is stronger than nurture. The characters of any living being are determined by two factors, heredity and environment, or Nature and nurture, but inheritance is more vital than environment. Heredity and education supply a potential figure, both multiplied give something, if one is nothing the result is nothing. But heredity is the weightier factor. When Nature and nurture compete for supremacy on equal terms, says Galton, the former proves the stronger. Neither is self-sufficient; the highest natural endowments may be starved by defective nurture, while no carefulness of nurture can overcome the evil tendencies of an intrinsically bad physique, weak brain or brutal disposition.

No degenerate or feeble stock can ever be converted into a healthy and sound stock by environment, such as sanitary surroundings, good laws, education, wealth, etc., as the radical doctrinaires would like to make us believe. Such means may render individual members of the stock passable or even strong members of Society, but the same process will have to be gone through again and again with their offspring. Improved conditions of life mean better health for the existing population, greater educational facilities, means greater capacity for using existing ability. But lasting improvement can only be secured by breeding from good stock. The development of the future generations will be little influenced by environmental improvements, if the conditions of the blood have been neglected. Nothing can be brought out from a child by eugenics which is not within him.

The elimination of the feeble stock, met with not only in the slums but also in the quarters of wealth, which weighs down the body politic, can only be effected by the prevention of the propagation of those afflicted with undesirable characters.

There are three methods to effect the elimination of the undesirables—segregation, sterilization and castration.—*Dr. Bernard S. Talmey.*

\* \* \* \* \*

*The Chief Cause of Vice.*—Students of vice, whether teachers, clergymen, social workers or physicians, have been laboring for years to find the cause and cure for vice, and especially



for prostitution. They have failed so far to agree on either the cause or the cure, but it is interesting to know that upon one point they have been compelled to agree, and that is, that *ignorance of the sex functions* is one of the strongest forces that sends young girls into unclean living.

This, together with the knowledge of the rapidly increasing spread of venereal diseases and the realization of their subtle nature, has awakened us to the need of a saner and healthier attitude on the sex subject, and to the importance of sex education for boys and girls.

This need has shown itself so clearly that the question no longer seems to be, "Is there need of instruction?" but, "Who shall instruct?" Shall the mother or teacher instruct? When shall such instruction be given? In childhood, or in puberty? These are the points now under discussion.

To the writer the answer is simple: The mother is the logical person to teach the child as soon as questions arise, for it is to the mother that the child goes for information before he enters the schoolroom. If, therefore, the mother answers his questions truthfully and simply and satisfies his curiosity, she will find that the subject of Sex ceases to be an isolated subject, and becomes a natural part of the child's general learning. A woman does not need to be a college graduate, with a special degree in the study of botany, before she can tell her child the beautiful truth of its birth. *But she does need to clear her own mind of prudishness, and to understand that the procreative act is natural, clean and healthful; that all Nature is beautified through it, and consequently that it is devoid of offensiveness.*

If the mother can impress the child with the beauty and wonder and sacredness of the sex functions, she has taught it the first lesson, and the teacher can elaborate on these teachings as the child advances in school. All schools should teach anatomy of the sex organs and their physiology, instead of teaching the human body in the neuter gender as has been done up to this time.

The whole object of teaching the child about reproduction through evolution is to clear its mind of any shame or mystery concerning its birth and to impress it with the beauty and naturalness of procreation, in order to prepare it for the knowledge of puberty and marriage.—*Mrs. Margaret H. Sanger.*

*The Effects of Celibacy on Woman.*—It is difficult to judge of the effects of celibacy in the male sex. It is quite possible that there may be “old bachelors” who have been strictly celibate all their lives, and who in the course of time acquire certain physical peculiarities; but the effects of celibacy on women are very apparent. According to Dr. Havelburg, of Berlin, unmarried women, as a rule, begin to lose their freshness when nearing the thirties. The rosy color of the cheeks gradually disappears, the skin loses its elasticity and firmness, the lips become thin, and the naso-labial fold acquires a sharply pronounced character. Deep shadows form under the eyes, the latter develop a dull lustre and sorrowful expression. The voice receives a sharp by-sound. Short but distinct hairs appear on the face instead of the former soft down. The cushion of fat under the skin diminishes, and this is especially noticeable in the breasts, which become smaller, and often also flaccid and pendulous. On this account the neck appears thin, the shoulders angular, and the upper ribs and collar bones very prominent. Moral indisposition and all sorts of nervous complaints are frequent accompaniments of these conditions. The learned doctor proceeds thus: “A regulated sexual life, such as our social institutions make possible for women in the form of marriage only, would act as a perfect source of youth. Thus Nature has her fixed laws which demand their due with inexorable severity.”

Marriage indeed is the remedy which many a doctor would like to be able to apply for the cure of the innumerable female patients who come to them imploring their medical advisers to tell them the reason why they should be afflicted with so many mysterious and apparently incurable ailments. Some doctors, in moments of exasperation, have been betrayed into blurting out the truth; but they know that, in the majority of cases, such information is as useless as it is cruel.

Although the number of male children born is about equal to that of female, yet the rate of mortality among male infants far exceeds that among female. Emigration also is responsible to a large extent for the dearth of males in the marriage market. So long, therefore, as our ethical code insists on monogamy—which, by the way, is another instance of an idea which was prompted in the first place by economical considerations—and forbids female infanticide, yet which does nothing to check the

general slaughter of the innocents, mostly male, which goes on every day, the army of old maids is bound to increase.—*Dr. A. A. Philip.*

\* \* \* \* \*

*To the Really Innocent and Pure All Things Are Pure.* The result of this morbid sense of shame is that there is scarcely any other subject so completely ignored as the sex function, although so much of the health and happiness of the race depends upon it. This false sense of shame is the cause of our modern fig-leaf modesty and prudery, which attributes a particular obscene meaning to everything sexual. It has created that diseased imagination, depraved beyond all hope, which can find any prurient gratification in the cold, chaste nakedness of ancient marble. The mere nude arms or legs of a small school girl, the furnishings of a public bath-house, the naked limbs of a Tyrolean peasant, or the grandest works of art awaken in them lascivious thoughts. Individuals with such traits are accustomed to interject their own diseased imagination, guilty conscience and obscene sentiments into the purest artistic creations, be they sculptured, painted, written or spoken.

The prudery and obscenity of these victims of a diseased imagination and perverted moral sense have succeeded in distorting our judgment on questions of sex in such a way that any desire for scientific instruction in these subjects has become inextricably confused with ideas of prurience and impropriety. Matters pertaining to the generative functions are, as a rule, excluded even from treatises on physiology. But for the anatomists and insanity experts, nothing would be known about the physiology of normal Love. The zealots wish to persuade us that the population of the earth increases by the stork-method.

Even the physician who is often called upon for advice about things pertaining to the psychological phase of sex, prudishly ignores the mightiest of human instincts which is so intimately related to human weal and woe. He is conversant with the sexual question by virtue of its anatomical and physiological knowledge, and he is well aware of its hygienic, sociological and ethical importance. But when he is to furnish enlightenment on psychic or pedagogic questions of sex, he is embarrassed because of a lack of knowledge of sex psychology. The great teachers of our



medical schools, who ought to impart to their pupils all their knowledge about the nature of things concerning Love that they have gathered in their long and extensive experience, seem either to consider Love a subject too sacred for physiological and psychological analysis, or are really afraid to arouse the anger of the zealots who make of the sanctuary of sex attraction a forbidden topic.—*Dr. Bernard S. Talmey.*

\*   \*   \*   \*   \*

*Nocturnal emissions* cannot be considered as caused by erotic dreams; it is rather vice versa, viz.: that the dreams are influenced by the erotic desire caused by an overfilled condition of the seminal vessels, which are emptied by a spasmodic contraction as a part of the sexual orgasm.

Thus, the sexual organs influence the brain and nervous system, even during sleep. Analogous emissions of fluid in the form of secretion from several glands of the female generative organs also take place, though they do not occur as frequently as in man. They are called female pollutions. The nocturnal and unconscious seminal emissions often have a tendency to make a young man melancholy and anxious, but these constitute Nature's manner of conserving energy, and are necessary for sexual equilibrium in men who do not perform their sexual function. If they do not occur too often and are accompanied by erotic dreams and erection, and are followed by general sensation of well being, increased power and desire for activity, they are not harmful but beneficial and necessary for preservation of health.

Pollutions, following too closely upon each other are of morbid nature, but it is difficult for the physician to decide whether or not they occur too often, and he must possess good judgment in making such decisions in a number of cases, because no two people are alike, even in sexual matters. What is normal in a strong passionate man, is excessive, or abnormal in one of a weak constitution. One should invariably weigh and consider the symptom complex present in every case before deciding whether these emissions are only Nature's safeguards, or a pathologic condition. A powerful constitution can endure a great expenditure of seminal fluid, whereas a weak one suffers by far smaller loss.

Normally, pollutions occur in strong healthy men about two or three times per month, and in some cases even weekly emissions cannot be considered excessive or abnormal, if not followed by

general depression, bodily or mental fatigue or lassitude. Pollutions can occur still more frequently, every other or every night; but under such abnormal conditions they tend to weaken mind and body, and often lead to hypochondria, mental aberrations and weariness of life.

Predisposing causes of frequent pollutions are many, for example, too abundant evening meals, rich highly seasoned food, alcoholic drinks, sleeping in too warm beds or in the dorsal position, erotic excitement of the phantasy, previous masturbation, phimosis, lacking cleanliness of the male organ, hemorrhoids, worm in the bowel, etc. In certain individuals seminal emissions occur very often without any apparent predisposing reason. Hereditary disposition or some peculiar abnormal condition of the tissues may be considered the cause, in such instances.—*Dr. Anton Nyström.*

\* \* \* \* \*

*Frequency of Sexual Intercourse.*—It is not possible to lay down a general rule with regard to the frequency of sexual intercourse, notwithstanding the earnestness with which religious zealots, physicians, and moral teachers have in all ages endeavored to determine how often it was proper for a man to cohabit with his wife. The rules that have been prescribed by the various authorities had in view, for the most part, the protection of the wife from excessive demands on the part of her husband; sometimes, however, by the establishment of a minimum period, a certain amount of sexual gratification was secured to the wife; finally, also the generation of a healthy posterity had to be taken into consideration. Ribbing, however, justly observes: "Sexual intercourse results from a natural impulse, and he whose senses are unimpaired, and who has learned, at the same time, amid the tumult of sensations, to preserve proper consideration for his wife—such a man runs little danger of making any mistake. In opposition to the opinion of many, I regard it as entirely right and reasonable that husband and wife should have intercourse whenever physically and mentally impelled to that act. Nor do I see any reason why, during the first period in which they are able to enjoy without intermission the pleasures of sexual intercourse, they should, in accordance with any theory whatever, impose on themselves further restraints than those demanded by care for their physical and mental health. The touchstone of



marital hygiene is this, that on the day following intercourse both husband and wife should feel perfectly fresh, vigorous, and lively, alike in body and mind—even more so, perhaps, than on other days. In the absence of such feelings, we may feel assured of the occurrence of sexual excesses.” The same author quotes a saying of Pomeroy’s: “We may quaff the nectar as freely as we will—Nature herself mixes the draught and holds the goblet to our lips; if, however, we drink too much, she first dilutes the draught with water, later adds gall, and ultimately perhaps deadly poison.”

The occupation, trade or profession, and the nutritive condition and physical constitution of the married pair have an important bearing on the frequency with which, without detriment to health, cohabitation is permissible. The rules of the Hebrew Talmud already take these circumstances into account, ordering as they do that young and powerful men not engaged in any regular occupation shall have intercourse with their wives daily; manual laborers, on the other hand, once a week only; whilst brain-workers, finally, or those whose work is extremely arduous, should allow an interval of one or more months to elapse between the acts of intercourse. Acton also prescribes that in the case of brain-workers and of those manual workers whose labors are exhausting, intercourse must not occur more frequently than once every week or ten days.—*Dr. E. Heinrich Kisch.*

\* \* \* \* \*

*Man Has No Right to Injure His Own Children.*—The careless or wilful procreation of a vicious progeny is not only a crime against humanity, but a wrong to the children who ought to have remained unborn. Hence it is the solemn duty of any couple, if there is a taint in their ancestry, voluntarily to exclude themselves from parenthood. If their mentality does not enable them to exercise such control, Society has a right, nay! the duty, to effect the exclusion in its own interest as well as in the interest of the offspring, who would become a burden to themselves.

This exclusion cannot be realized by laws against marriage of individuals physically or morally inferior. Such laws are entirely futile in relation to propagation. Only hypocrites or perfect fools do not see it. The sex-urge plays a particular rôle in degenerates. They suffer from a diseased exaggeration of the sex impulse. No laws, except it be segregation, can prevent the



seduction of the feeble-minded woman or the rape by the criminal man, and a new generation of deteriorates would arise, marriage or no marriage. The baneful sentimentality or sordid economy which allows moral weaklings to roam at large on parole or suspended sentence can only lead to the breeding of mental and moral cripples. If the number of the undesirable and unfit should be decreased, not the marriage but the breeding of the defectives should be prevented.

Among the means of prevention of propagation, the segregation of the defectives in different homes (such as asylums for epileptics, for feeble-minded or for deaf-mutes) would be the most humane method, but also the most unsafe (temporary escape is never impossible), and the most burdensome for society. To segregate people who are still able to support themselves and deprive society of their earning capacity represents a great economic loss to the body politic.

The other quite humane method of prevention of propagation is simple sterilization. The slight operation of vasectomy, respectively salpingectomy, does not give the least inconvenience nor does it alter in the least the mental or bodily character of the operated individual. This small operation has no more effect upon the person, in regard to his potency, than an obliteration of the vas deferens in the male or of the Fallopian tube in the female; and these obliterations cause so little inconvenience that they remain, as a rule, unknown to the man or woman. They are only accidentally discovered when the patients apply for the treatment of their sterility.—*Dr. Bernard S. Talmey.*

\* \* \* \* \*

*Psychic Impotence* is a symptom which occurs accidentally in the normal state, and very frequently in psychopathological conditions.

A representation or idea of any kind may suddenly paralyze by suggestive action the normal reflex mechanism of the center for erection. The blood ceases to accumulate in the corpora cavernosa and erection is either arrested or not produced at all. For example, a very excited lover, who has had strong erections at the moment when he prepared to copulate, may be suddenly overcome with the idea that he will fail, or by some other thought which paralyzes erection and renders coitus impossible. The remembrance of such a failure and the distress and shame

attached to it, even efforts to produce erection indirectly for another attempt, constitute further causes of inhibition of the cerebro-spinal activity; they temporarily extinguish the sexual appetite, and prevent by their interference the automatic mechanism of erection which they strive to produce. The greater the fear of failure, the more the psychic impotence increases. This phenomenon may be limited to a certain woman, but it is more often general. Sometimes an incomplete erection is produced, which is insufficient.

This condition, which depends on auto-suggestion, is best treated by hypnotic suggestion. The sentiment of impotence powerfully depresses a man, and the depression increases his impotence. This condition often, however, disappears by itself.

A special variety of psychic impotence is that in which erection takes place, but the idea of ejaculation predominates so much that it paralyzes the voluptuous sensations, and causes ejaculation to occur without pleasure, or even erection to cease.

Impotence may occur at the first coitus, or may come on gradually. It is often produced suddenly at the time of marriage in persons who have hitherto been very capable, even in Don Juans. Men may have normal erections and pollutions, but these may be stopped by counter-suggestions at each attempt at coitus. Habitual masturbation may in some cases contribute to produce impotence, but we must not generalize from such cases, nor construct a dogma from them, for continence may also be a cause of impotence.

All these details, which are combined in all kinds of ways with other sexual troubles, but which are also produced alone in men who are otherwise normal, throw much light on the relation of the momentary mental state of man to his sexual appetite and the accomplishment of coitus.—*Dr. August Forel.*

\* \* \* \* \*

*Frigidity in Women.*—The word frigidity means coldness, and when a woman has no desire for sexual relations or experiences no pleasure when she has sexual relations, she is said to be “frigid.”

Some cases suffer only from lack of desire, others from lack of pleasure, and still others from both. In some cases the frigidity is congenital—that is, the lack of desire with inability to experi-

ence pleasure during the act is inborn. In most cases, however, it is acquired, or is only temporary, and is due to various causes. Frigidity is much more widespread among women than it is among men. Some physicians claim it is present in fifty per cent. of all women. This may be an exaggeration, but if we put the number at twenty-five per cent. we will be quite near the truth.

The causes of frigidity in women are many, but here are the most important ones: First and foremost is the repression of all sexual manifestations which the unmarried woman has to practice and has had to practice for many centuries. So that a part of the frigidity is hereditary. You cannot entirely eradicate a natural instinct, but that by continually repressing it, by giving it no chance to assert itself, you may weaken it—about this there can be no question.

The second cause is masturbation. Cases that have been addicted to excessive masturbation are very apt to develop not only frigidity, but complete aversion to the sexual act, and inability to experience any pleasure or orgasm. Such cases we come across every day.

A third very important cause is sexual weakness in the husband. When the husband is sexually weak (suffering with premature ejaculations) he either fails to awaken the sexual instinct in the woman, or, if it has been awakened, it is apt to turn not only into frigidity but into aversion to the act.

The fourth cause is often merely dislike towards the husband. The last two causes, weakness of the husband and dislike towards him, are unfortunately very frequent, and a wife who was frigid with one husband may show herself very passionate on marrying another man.

The fifth cause is fear of pregnancy.

The above are the principal causes. Other causes may be disease of the womb, laceration of its neck, inflammation of the ovaries, vaginitis, disease of the thyroid gland, etc.

It is an unfortunate fact that women who were frigid up to the age of forty or so may become very passionate after that age.

As to the treatment of frigidity, little or nothing can be done for frigidity that is congenital. Most of the other kinds of frigidity, however, can be cured.—*Dr. William J. Robinson.* (See last page.)



*The Sex Joke.*—We must gradually, as fast as we can, give up the idea that sex is funny. If we think of it as a purely scientific physiological phenomenon of rare significance and extraordinary power, the time-worn jokes will cease to enter our consciousness and our conversation, because they will be actively irrelevant. There will be no association of ideas to draw them out. For we shall know that sex is our greatest blessing, and shall co-operate heartily to banish all the mismanagement which makes it a curse.

But to the suggestion that the sex joke has got to go, the world says, "Impossible! It is as old as Adam!" Yes, and the drink joke is as old as Noah, and the hell joke is as old as Orpheus! Old as they are, they are not immortal, for the hell joke is practically dead in educated America, and the drink joke can hardly raise a smile it is so feeble. The first has died because children are no longer threatened with hell, and grown people no longer think about it. The second is moribund because liquor is less and less familiar to children, and by grown people it is more and more disused and disapproved. A joke needs a basis of familiar reality from which to turn its somersault. Even now the sex joke has disappeared where the grown people have ceased to misuse sex and the children regard it simply as a scientific fact. Thus science is rapidly removing many of our old-time errors and the reliable old jokes that went with them. Nature is never funny. Fun implies choice, and there is no choice about a scientific fact. It is merely so.—*Annie Winsor Allen.*

\* \* \* \* \*

*Why Women Become Prostitutes.*—The young man should know that the great majority of prostitutes do not willingly undertake the shameful business of selling their virtue. He should know that the majority have gone downward for such reasons as follows: Many a woman has been betrayed by some detestable man who pretended to love her. Poverty has forced many other women to the first downward step. Many are easy victims because they belong to the feeble-minded class. Others have been driven into immoral life by parents and even husbands. Still others have been drugged, and raped while insensible. A limited number have begun prostitution as "white slaves" kept as prisoners until all hope of a better life has vanished. A few have deliberately begun to accept the attentions of

lewd men in order to get money for luxurious dress and finery. And relatively very few have started downward because of sexual passion such as commonly influences men. In short, every young man should be informed that most women living by prostitution have begun innocently or unwillingly; but, having made one false step, Society has shunned them, even near relatives have cast them off, and a career of prostitution has appeared the only way of making a living, vulgar and unspeakably sordid though it be. *It is evident that the responsibility for prostitution rests almost entirely upon men.* Unfortunately, Society does not recognize this fact and has no way of dealing legally with both men and women found associated in houses of prostitution. At present the women arrested for prostitution are treated as criminals, while their male associates in vice are allowed to depart as if they were respectable citizens.

Tell young men these facts as to why women become prostitutes. Help them to realize that most of these women are pitiful victims of man's worse than brutal sexual passions. Then add the astounding fact that very many of the women of the underworld have short lives, their health being undermined rapidly by dissipation, by alcohol used to bury their shame or to stimulate their flagging energies, and by the two loathsome diseases, gonorrhea and syphilis, which relatively few prostitutes escape—tell young men such facts which eminent physicians and sociologists have often verified, and there are good chances of striking sympathetic notes in their young manhood.—*Prof. Maurice A. Bigelow.*

\* \* \* \* \*

*Pre-natal Impressions.*—It is believed by many people that strong impressions made upon the mother during pregnancy may produce marks or defects in the child. This belief dates from earliest antiquity, and is widespread among all races. The belief particularly refers to the emotions of fright or sudden surprise; thus it is believed that if a woman during pregnancy should be frightened by some animal, the child might carry the mark of the animal upon its body, or it might even be born in the shape of the animal. Thousands of such *alleged* cases are given in proof. There is hardly a layman, or, particularly, a laywoman, who does not claim to know of authentic cases of maternal impressions.



It is a thankless task to try to shatter well-established beliefs, and I do not hope to succeed in persuading that maternal impressions are untrue and lack scientific foundation. But I consider it my duty to state my belief, whether you accept it or not. In my opinion there is not a single *well-authenticated* case of maternal impression. There is hardly a case of defect or monstrosity where the cause is supposed to be due to maternal impression which cannot be explained in some natural way, or simply by accident. Thousands of women are frightened or shocked by disagreeable sights, by crippled men, by animals, and still their children are born perfectly normal. On the other hand, many marked, or defective, or monstrous children are born in which no maternal impressions can be given as the cause. So why can it not happen when the mother was frightened by something during her pregnancy, and the child was born with some mark or defect, that the latter was simply an accident and not the *result* of the impression? Because a thing *follows* another thing it does not mean that it was *caused* by that other thing.

Very often the so-called shock or fright which the mother experiences during gestation is simply a product of her imagination. We know of many cases where the mothers never mentioned that anything happened to them, and only after the child was born with some kind of mark or defect they began to hunt for causes and claimed that such and such a thing happened to them while they were pregnant, but on close investigation the alleged event was found to have originated in the mother's brain.

In short, while the subject of maternal impressions is an interesting one and demands further investigation, there is at the present time no scientific justification for the belief in such impressions. Particularly must we scout any stories of maternal impressions during the latter part of pregnancy, during the fifth, sixth, seventh, eighth, or ninth month. Because after the child is fully formed no mental or psychic impressions can make birth-marks on it, amputate its limbs, or convert it into any sort of monstrosity.—*Dr. William J. Robinson.*

\* \* \* \* \*

*The Defloration*, as it is termed, is a duty involving the husband's utmost consideration and tenderness. It is so important a matter that it cannot be dismissed as a simply physical act. The conduct of a man in the highly critical first weeks of mar-



ried cohabitation usually decides to a great extent the chances of happiness for himself and his bride throughout the rest of their lives. Very many unfortunate unions are predetermined by mishaps, misunderstandings, and involuntary errors occurring in the honeymoon stage of matrimony. That an acute psychic excitement should exist in both bride and bridegroom on this auspicious and sacramental occasion is inevitable. Both may be wholly inexperienced. Both are, more or less, overwrought through emotions aroused by a long-deferred wedding, and by the sudden novelty of a permissible throwing off of the ordinary disguises that veil the deepest instincts and desires. Too frequently the bride is unprepared or ill-prepared in theoretical knowledge of conjugality. She is excessively timid, maybe slightly hysterical. Vague, and often terrifying, hints may have been whispered that a torturing ordeal awaits her. There are many instances of the young wives fleeing from their husbands at this appalling hour. It is not an uncommon occurrence for the bride to imagine that her partner is acting immorally or abnormally. Many women have not the slightest knowledge of their own physical structure, and no inkling of marital duties. A woman of twenty-five—reared in a careful tradition of ignorance, and accustomed to thrust all thought of sex out of consciousness—finds herself suddenly confronted with the unknown, the unsuspected, the alarming. Her standard of modesty and seemliness may be so violently shaken that a real injury to the psyche results.

I know women, now advanced in years, and mothers of men, who have never recovered entirely from the tragedy of maladroit initiation into marriage. The dim fears of maidenhood have been rudely transformed into a recoil, and the attitude towards sex has remained morbid or hostile throughout the whole of married life. Often frigidity is engendered in a wife during the first month of marriage. A word may disturb the subtle and delicate poise of the emotional nature at this fatal hour. Bluntness and directness may terrify or disgust, and an impetuous impatience on the part of the man may freeze a budding ardor in his bride.—*Walter M. Gallichan.*

\* \* \* \* \*

*Alcohol and Sexuality.*—It needs no extended argument to convince the average person that an individual will do things when under the influence of drink that he or she would not do

when perfectly sober. It is an old saying that "When the wine is in, the wits are out." But there is a deeper connection and relation between alcoholic drink and sexual indiscretions than is usually realized by the average person. Besides the commonly known weakening of will-power and self-control arising from the influence of strong drink, there are certain influences concerning the sexual nature and arising from the presence of alcohol in the system, which are not known to most persons.

In the first place, there is an exhilarating effect arising from certain kinds of liquor, wines, and other forms of alcoholic drinks, which manifests directly in an excitement of the sexual centers and organism. In many cases a strong sexual excitement, absent at other times, is aroused, and the person is carried away with the force of passion unknown under other circumstances. Added to this the weakened will-power arising from too much drink, and we have an explanation of many cases of "mistakes" of women. It would appear that women are even more susceptible than are men to unusual sexual excitement arising from alcoholic drinks; and that, therefore, they should be especially cautious in the indulgence in such drinks, particularly when in the company of strange men, or men careless in regard to sexual morality and respect for women in their company.

But there is still a deeper reason, based upon the latest discoveries in psychology, why caution in this respect should be observed by women. We allude to the discovery that alcohol first affects the mental and emotional tendencies of more recent racial acquirement, acting so as to paralyze and inhibit the activities thereof, and thus to release the activity of the more primitive emotions and motive activities. Thus, the woman under the influence of alcohol finds that the more recent racial traits, such as sexual control, restraint, sexual morality, conventional observations, etc., are practically temporarily paralyzed and inhibited, or to use the current slang phrase, are "put out of commission" for the time being; and, at the same time, the old elemental, savage, barbaric, "cave man" instincts, habits, and methods of action, are brought to the surface, and proceed to manifest their activity if opportunity be granted for the same—and the opportunity is usually granted. This being found to be true, it is seen that the woman so under the influence of liquor is, for the time being, little more than a "cave woman," or barbarian, with all the lax sex morality of the



latter, and with all the tendencies to manifest into activity the primitive impulses arising in her nature and demanding expression. Added to this the weakening of will-power always accompanying the alcoholic influence, it is seen that the woman under the influence of strong drink is an easy prey to designing men, and a willing victim to her own lower passions.

An authority on sex subjects says: "That Bacchus, the god of wine, is the strongest ally of Venus, the goddess of love, using the term Love in its physical sense, as the French use the word '*amour*,' has been well known to the ancient Greeks and Romans, as it is well known today to every saloon-keeper and every keeper of a disreputable house. And all measures to combat venereal diseases and to prevent girls from making a false step will only be partially successful if we do not at the same time carry on a strong educational campaign against alcoholic indulgences. \* \* \* Of what use are warnings to a girl, when under the influence of a heavy dinner and a bottle of champagne, to which she is unaccustomed, her passion is aroused to a degree she has never experienced before, her will is paralyzed and she yields, though deep down in her consciousness something tells her she shouldn't? She yields, becomes pregnant, and is in the deepest agony for several months, and has a wound which will probably never heal for the rest of her life. Of what use have all the lectures, books, and maternal injunctions been to her? \* \* \* I believe that the sex instinct can be stimulated artificially beyond the natural needs, and among the artificial stimulants of the sex instinct alcohol occupies the first place. And bear in mind that alcohol produces even a stronger effect upon women, in exciting the sexual passion, than it does on men. Women are more easily upset by stimulants and narcotics, and that is the reason why it is more dangerous for women to drink than it is for men. It is impossible to give statistics and exact or even approximate figures. But there is no question in my mind, or in the mind of any careful investigator, that if alcoholic beverages could be eliminated, the number of cases of venereal infection would be diminished by about one-half. And what is true of venereal disease is also true of the seduction of young girls. Alcohol is the most efficient weapon that either the refined Don Juan or the vulgar pimp has in his possession."

Our advice to the woman who is asked to drink liquor in the company of a man outside of her immediate family circle is emphatically this: *DON'T DO IT!—Dr. R. B. Armitage.*



*Sterility* or barrenness is a condition of inability to have children. In former years the opinion prevailed generally, whenever a couple was childless, that fault was exclusively the woman's. It wasn't even thought that the man could be to blame. We know now that in at least *fifty per cent.* of cases of sterility, or childless marriages, the fault is not the woman's but the man's. It is, therefore, very unwise in conditions of sterility to subject the wife to treatment without first examining the husband. Nevertheless, this is still often the case, particularly among the lower classes or among the ignorant. There are cases where the woman goes from one doctor to another for years and is subjected to all kinds of treatment, when a simple examination of the husband would show that the fault lies with him.

Some women have one child and are unable afterwards to give birth to any more. Such a condition is called one-child-sterility. It is generally due to an inflammation of the Fallopian tubes which closes up the openings of the tubes into the womb, so that no more ova can pass *from* the ovaries *through* the tubes *into* the womb. This inflammation may be the result of childbirth, for childbirth alone may set up an inflammation, or it may be due to an infection contracted from the husband.

In order to be fertile, that is, to be able to conceive and give birth to a living child, the woman's external and internal genital organs must be normal, her ovaries must produce healthy ova, and there must be no obstruction on the way, so that the ova and the spermatozoa can meet. The mucous membrane of the womb must also be healthy, so that when the impregnated ovum gets attached to the womb it may develop there without any trouble, and not become diseased or poorly nourished and cast off.

We must always remember that the woman's share in bringing forth children and perpetuating the race is much more important than the man's. When a man has discharged his spermatozoa his work is done—the woman's only commences.

The conditions which cause sterility in women are many, but the most common cause is a salpingitis or an inflammation of the Fallopian tubes, which may be caused by gonorrhea or any other inflammation. A severe leucorrhea may also be the cause of sterility, because the leucorrheal discharge may be fatal to the spermatozoa. Another cause is a severe bending or turning of the uterus either forwards or backwards. The opening of the

neck of the womb, the os, may also be closed, or practically so, from ulceration, from strong applications, etc. In some cases sterility may be due to severe constitutional diseases, when the person is very much rundown and so anemic that menstruation stops. Unfortunately this is not always the case, for women even in the last stages of consumption may, and often do, become pregnant. Syphilis unfortunately does not cause sterility; it only causes miscarriages until controlled by treatment.

The treatment of sterility can be successfully carried out only by a competent physician, particularly by one who is devoting himself specially to this kind of work. *But I want once more to impress upon every woman who is sterile, and who wants to have a child, not to have herself treated or even examined until her husband has been subjected to an examination.*—Dr. William J. Robinson. (See last page.)

\* \* \* \* \*

*How Girls Are Led Astray.*—A large proportion of the victims of white slavery are from farms and smaller towns in the country. They are more easily duped by the wiles of the procurers than city girls, and their identity is more easily hidden; besides, they are more readily controlled, because they do not know much about city life. Many of these young girls are led to their doom in just trying to see what the World is like. They have been kept close to the home and know almost nothing of life. When they get away and have a little more liberty, love of romance and adventure and their ignorance lead them astray.

These girls from the country never have been taught that a young girl, friendless and alone in a large city, is in greater danger than she would be alone with wild beasts in the jungles of Africa; that thousands of men are watching for just such girls as they, waiting to lure them to their ruin, setting all sorts of traps for them. They are never told, perhaps, that thirty thousand men in New York City alone, not to speak of Chicago, Boston, St. Louis, and other big centres, make it a profession to lure just such innocent young girls into sin, and that many of them become rich in this awful traffic in human lives.

The country girl who has been accustomed to a quiet, simple life is often thrown off her guard by the glitter of the city, the evidences of luxurious living,—beautiful dresses, fine automobiles,



and people everywhere on pleasure bent. She is dazzled by these things and often loses her mental balance.

Such an unsophisticated, inexperienced girl is easily enticed to public dance halls, where young men who are experts in misleading girls often induce her to drink, and the proprietor purposely makes it very difficult to get water in these places. The dances last only four or five minutes, because the chief aim of the halls is to get the inmates to buy drinks. Thousands of girls are thus induced to drink, and, before they realize it, the hour is late and the young men persuade them that they can not afford to go home, but that they can explain the next morning that they stayed with their friends.

In other words, the most damnable methods are used to play upon the credulity and the vanity of these young girls. As a rule, of course, the girls know nothing about the character of the men who are trying to ruin them; who tell them especially if they are attractive, that it is a shame that such handsome girls should not have diamonds and beautiful clothes, and thus play upon their vanity. They often make them believe that they can get places for them on the vaudeville or theatrical stage, and that they will introduce them to managers, etc. These bogus managers are in the game with the "cadets," and under the pretense of helping the girls to positions, lead them farther and farther to their ruin.—*Rev. Orison Swett Marsden.*

\* \* \* \* \*

*Polygamous Sexual Instinct in Man.*—The tricks which are played on a man by his sexual appetite, especially by his polygamous instincts, must not be confounded with the systematic, artificial and abnormal training of the same appetite. The physical and psychic attractions of a woman are capable of completely diverting the sexual desires of a man from their primary object, and of directing them on the siren who captivates his senses. The elements of the sexual appetite here form an inextricable mixture with those of love, and constitute the inexhaustible theme of novels and most true and sensational love stories.

Hereditary pathological dispositions play a considerable rôle in many cases of this kind. Also, marriages of sudden and passionate love (we are not dealing here with love marriages concluded after sufficient reflection and deep mutual acquaintance-



ship) are not more stable than the so-called "*mariages de convenance*," for passionate natures, usually more or less pathological, are apt to fall from one extreme to the other. The power exercised by sexual passion in such cases is terrible. It produces conditions that may lead to suicide or assassination. In men whose power of reason is neither strong nor independent, opinions and conceptions are frequently changed; love may change to hatred and hatred to love, the sentiment of justice may lead to injustice, the loyal man may become a liar, etc. In fact the sexual appetite is let loose like a hurricane in the brain and becomes the despot of the whole mind. The sexual passion has often been compared to drunkenness or to mental disease. Even in its mildest forms it often renders the husband incapable of sexual connection with his wife.

For example, a man may cherish, respect and even adore his wife, and yet her presence and touch may not appeal to his senses, not excite his appetite or erection; while some low-minded woman will produce in him an irresistible sensual attraction, even when he experiences neither esteem nor love for her. In such cases sexual appetite is in more or less radical opposition to love. Such extreme phenomena are not rare, but hardly common. Although excited to coitus with the woman in question, the husband would not in any case have her for a wife, nor even have children by her, for after the slightest reflection he despises and fears her. Here, the sexual appetite represents the old atavistic animal instinct, attracted by libidinous looks, exuberant charms, in a word by the sensual aspect of woman.

On the contrary, in a higher domain of the human mind, the sentiments of sympathy of true love, deeply associated with fidelity, and with intellectual and moral intimacy, unite against the elementary power of the animal instinct. Here we see dwelling in the same breast (or, to speak more correctly, in the same central nervous system) two which struggle with each other.—*Dr. August Forel.*

\* \* \* \* \*

*The Seducer and His Conscience.*—Many a time when one has satisfied his lustful passions with the sweet, confiding girl whose love and confidence he has succeeded in winning, then turning away leaving her desolate and alone, he does not stop to think he has robbed, perhaps, one life of its sweetness and of its joy, that

he has turned one more soul away from hope and light down to the dark and empty shadows of despair, that he has done his part towards tempting one more girl to enter the avenues of prostitution, the darkest of all the paths of sin which feet of women ever trod. He does not stop to think that deeds like that have filled the brothels of our land again and again, until in truth they are constantly recruited from the ranks of those who have loved not wisely, but too well, or too passionately, and have been betrayed by him in whom they reposed their deepest confidence and whom they thought would be the soul of honor in their hour of need. But consequences too often follow these acts. When the girl finds maternity imminent, she is ready to turn from home and friends, she feels that she has been a disgrace to them, she has passed beyond the pale of pardon and of hope, and she either becomes a murderess and thus criminally rids herself of the unborn fruit of her womb, or going off in some secret place like the stricken deer, she bears the child and either seeks to rear it by the fruits of her prostitution or giving it over to some kindly family in adoption refuses to return, and in the dark plague spots of our cities, unknown, under an assumed name, plies her trade. How terrible to think that one has been the cause of so much ruin and of so much dark despair. The broken-hearted father, the tearful, praying mother, the relatives and loved ones feeling that they are now disgraced, the girl because of pride refuses to return, refusing to humble them by her presence underneath their roof or in the home; so she goes on in that brief life whose average is but from three to seven years, and then burns out like moths that flutter over burning flames or lighted candle until with singed wings they fall into eternal burnings.

*Not a pleasant subject for contemplation to a man who has even the vestiges or rudiments of a conscience; not a pleasant subject for his midnight dreams, nor for his waking hours, nor for his dying bed.—Evangelist M. B. Williams.*

\* \* \* \* \*

*Consanguineous Marriages.*—Consanguinity means blood relationship, and consanguineous marriages are those between near blood relatives. The physician is frequently consulted as to the permissibility or danger of marriage between near relations. The question geneally concerns first cousins, second cousins, uncle and niece, and nephew and aunt.



The popular idea is that consanguineous marriages are bad *per se*. The children of near relatives, such as first cousins, are apt to be defective, deaf and dumb, blind, or feeble-minded, and what not. This popular idea, as so many popular ideas are, is wrong. And still there is, of course, as there always is, some foundation for it. The matter however is quite simple:

We know that many traits, good and bad, are transmitted by heredity. And naturally when traits are possessed by both father and mother they stand a much greater chance of being transmitted to the offspring than if possessed by one of the parents alone. Now, then, if a certain bad trait, such as epilepsy or insanity, is present in a family that trait is present in both cousins, and the likelihood of children from such a marriage inheriting that trait is much greater than when the parents are strangers, the taint being present in the family of only one of the parents. But if there be no heredity taint in the cousins' family, and, still more, if the family is an intelligent one, if there are geniuses in the family, then there cannot be the slightest objection to marriage between cousins, and the children of such marriage are apt to inherit in a strong degree the talents or genius of their ancestors. In short, if the family is a bad one, one below par, then marriage between cousins or between uncle and niece should be forbidden. If the family is a good one, above par, the marriage between relatives of that family should be encouraged.

The idea that the children from consanguineous marriages are apt to be deaf and dumb has no foundation in fact. Recent statistics from various asylums in Germany, for instance, have shown that only about five per cent. of the deaf and dumb children were the offspring of consanguineous marriages. If 95 per cent. of the deaf and dumb had *non*-consanguineous parents, how could one say that even in the other five per cent. the consanguinity was the cause? If it were the other way around, then of course we could blame consanguinity. As it is, we can assume even in this five per cent. a mere coincidence, and we have no right to say that consanguinity and deaf and dumbness stand in the relation to each other of cause and effect.

It is interesting to know that among the Egyptians, Persians, and Incas of Peru close consanguineous marriages were very common. The Egyptian kings generally married their sisters. This was common custom and if the children born of such unions



were defectives or monstrosities the fact would have become quickly apparent and the custom would have been abolished. Evidently the off-spring of very close consanguinity was normal, or even above normal, or the practice would not have been continued such a long time.

It is perhaps worth while noting that one of the world's greatest scientists, Charles Darwin, was the child of parents who were first cousins.—*Dr. William J. Robinson. (See last page.)*

\* \* \* \* \*

*Erotic Centers.*—Of the whole of this group of phenomena, the most typical and the most widespread example is certainly the kiss. We have in the lips a highly sensitive frontier region between skin and mucous membrane, in many respects analogous to the vulvo-vaginal orifice, and reinforcible, moreover, by the active movements of the still more highly sensitive tongue. Close and prolonged contact of these regions, therefore, under conditions favorable to tumescence sets up a powerful current of nervous stimulation. After those contacts in which the sexual regions themselves take a direct part, there is certainly no such channel for directing nervous force into the sexual sphere as the kiss. This is nowhere so well recognized as in France, where a young girl's lips are religiously kept for her lover, to such an extent, indeed, that young girls sometimes come to believe that the whole physical side of love is comprehended in a kiss on the mouth; so highly intelligent a woman as Madame Adam has described the agony she felt as a girl when kissed on the lips by a man, owing to the conviction that she had thereby lost her virtue. Although the lips occupy this highly important position as a secondary sexual focus in the sphere of touch, the kiss is confined to man and, indeed, to a large extent, to civilized man.

There is yet another official frontier region which is a highly important tactile sexual focus, the nipple. The breasts raise, indeed, several interesting questions in their intimate connection with the sexual sphere and it may be worth while to consider them at this point.

The breasts have from the present point of view this special significance among the sexual centres that they primarily exist, not for the contact of the lover, but the contact of the child. This is doubtless, indeed, the fundamental fact on which all the touch contacts we are here concerned with have grown up. The

sexual sensitivity of the lover's lips to orificial contacts has been developed from the sensitivity of the infant's lips to contact with his mother's nipple. It is on the ground of that evolution that we are bound to consider here the precise position of the breasts as a sexual centre.

As the great secreting organs of milk, the function of the breasts must begin immediately the child is cut off from the nutrition derived from direct contact with his mother's blood. It is therefore essential that the connection between the sexual organs proper, more especially the womb, and the breasts should be exceedingly intimate, so that the breasts may be in a condition to respond adequately to the demand of the child's sucking lips at the earliest moment after birth. As a matter of fact, this connection is very intimate, so intimate that it takes place in two totally distinct ways—by the nervous system and by the blood.—*Havelock Ellis*.

\* \* \* \* \*

*The Sexual Sensibility of Woman.*—It is possible, however, that the greater extension of the sexual sphere in woman gives rise, if one may use the expression, to a greater dispersal of sexual sensations, which are not, as they are in man, closely concentrated to a particular point, and for this reason the spontaneous resolution of the libido (in the form of the sexual orgasm) is rendered more difficult.

Recently Havelock Ellis has made a searching investigation into the nature of the sexual impulse in woman. He found the following differences by which it was distinguished from the sexual impulse of the male:

1. The sexual impulse of woman shows greater external passivity.
2. It is more complicated, less readily arises spontaneously, more frequently needs external stimulus, while the orgasm develops more slowly than in man.
3. It develops in its full strength only after the commencement of regular sexual intercourse.
4. The boundary beyond which sexual excess begins is less easily reached than in man.
5. The sexual sphere has a greater extension, and is more diffusely distributed than in man.

6. The spontaneous appearances of sexual desire have a marked tendency to periodicity.

7. The sexual impulse exhibits in woman greater variability, a greater extent of variation, than in man—alike when we examine separate feminine individuals, and when we compare the different phases in the life of the same woman.

In the majority of cases the sexual frigidity of woman is, in fact, apparently merely either because behind the veil prescribed by conventional morality, behind the apparent coldness, there is concealed an ardent sexuality, or else because the particular man with whom she has had intercourse has not succeeded rightly in awakening her erotic sensibility, so complicated and so difficult to arouse. When he has succeeded in doing so, the sexual insensibility will in the majority of cases disappear.

Where sexual frigidity in woman is enduring in character, we have to do either with inherited influences, with sexual developmental inhibition, the psycho-sexual infantilism of Eulenburg, or with some disease (especially hysteria and other nervous disorders), and with the consequences of habitual masturbation.

Speaking generally, the sexual sensibility of woman is, as we have seen, of quite a different nature from that of man; but in intensity it is at least as great as that of man.—*Dr. Iwan Bloch.*

\* \* \* \* \*

*The Time When Impregnation Occurs.*—While many ingenious theories have been advanced in recent years touching the precise point, or period, at which impregnation takes place, it is regrettable that at the present stage of the investigations no authoritative judgment, founded on actual knowledge, can be passed. From observations, however, made in a great number of cases by Tait, Kruger, Pozzi, Schroeder and others, it is apparently certain that it must occur, as to time, during the *first half* of the menstrual period, and most probably within a week after the cessation of the catamenial flow. Raciborski observed sixteen cases in which conception occurred as late as the tenth day after; and from what I have been enabled to glean from a vast mass of literature on the subject, it is fair to assume that fully 99 per cent. of all cases occur within twelve days after termination of the monthly flow.

There is little substantial evidence to support the theory that impregnation may occur at any time by the mere rupture of



an ovisac; nor is it at all probable that the ovum may be retained in the Fallopian tube from one menstrual period to another; the contrary, indeed, being pretty fully established by examination of animals.

The most probable hypothesis that the ovum, after ejection from the ovary, is from six to twelve days in passing through the tube, and that impregnation occurs *within that place and period*. Pouchet extends the time to fourteen days, as does also M. Coste; but the slight difference in time is of little consequence, the important feature of the discussion being to fix the place and method in which, and by which, impregnation takes place.

This has apparently been done; at least with such a degree of certainty as to justify us in believing that whenever a conception takes place after the twelfth or fourteenth day of the menstrual interval, it is owing to the Graafian vesicle having failed to discharge the ripened ovum, the one which came to maturity at the previous menstrual period; which ovum being ruptured by the excitement of sexual intercourse, at *any time* prior to the next subsequent menstruation, may insure impregnation.

The summary of our established facts, then, seems to be, that it is during the menstrual period that the female ova are ripened. That from the ovary they are discharged into the Fallopian tube, the journey which occupies them from *six to fourteen days*, according to functional activity, and that, if impregnation occur at all, it must occur before the ovum has passed out of the tube. Should it not be fertilized by the spermatozoon *within the tube*, or *within the ovary itself*, there will be *no impregnation*, the ovum passing into, and being lost in, the womb.

Then, if five days be allowed for menstruation, and fourteen for the passage of the ovum through the tube, there remains—and this is the point arrived at by the previous remarks—a *period of nine days during which impregnation cannot occur*.

I use the word cannot, of course, only as a substitute for “extreme improbability”; the ratio in which it may occur—once in every three to five hundred cases—being such as practically to exclude it from consideration.—*Dr. J. Richardson Parke.*

\* \* \* \* \*

*Hygiene of the Nuptial Night.*—The hygiene of the nuptial night deserves from the physician more attention than it has hitherto generally received. He should warn and enlighten the

young husband, in order that the brutality with which the act of defloration is apt to be performed may be lessened, and further in order that mistakes in this connection, resulting from ignorance and likely to have serious consequences, may be avoided. It is well known that lacerations of the hymen and its environment, and even serious injuries of the genital organs, may result from maladroit attempts at penetration. The physician will admonish the husband in the words of Michelet: "Bear in mind in this hour that thou art an enemy, a tender, considerate, and gentle enemy!"

The young woman entering upon marriage should receive instruction from her mother regarding all the sexual processes of copulation, instruction at once earnest and complete. By such enlightenment, the young bride will be spared much suffering, and a sudden disillusionment which might seriously affect the whole of her future life will be avoided; complete ignorance, on the other hand, may lead, not merely to needless mental and physical suffering, but to the most tragic consequences on the bridal night. In one case known to me, the young wife, who before marriage was utterly ignorant of the nature of physical love, was so completely overwhelmed in her ideals by the somewhat energetic procedure of the bridegroom as soon as he found himself alone with his wife, that she fled from her home then and there in the night, and by no persuasions could be induced to return.

In that decisive moment in which the maiden loses her virginity, she must find in her husband, not the brutal man who forcibly takes possession of her body, but the chosen man of all, to whom her love can refuse nothing.

"Delicate foresight and restraint," writes Ribbing, "are needful above all at the commencement of married life. The young wife, coming to the bridal bed a pure virgin, is not, like her husband, fully prepared for what is to take place. In all cases she is somewhat fearful of the new experience. The first act of intercourse involves for her a certain amount of pain, and this pain is not solely physical. \* \* \* Moreover, we must remember that the entire change in her mode of life makes a deep impression upon a woman's mind; time and quiet are needed before she can find herself at home in the novel surroundings, before she can adapt to the changed circumstances her



moral and religious convictions, and before she can 'think true love acted simple modesty.' Impatient husbands, through want of knowledge and lack of consideration during the honeymoon, have often ruined the happiness of subsequent married life."

It happens often, unfortunately, that the wife has reason to complain of the reckless manner in which her husband has used, or misused, his sexual powers. Frequently enough, on the bridal night, the man proceeds with such violence in his assault on the virgin reproductive organs of his newly-wedded wife, that we must actually speak of him as ravishing an ignorant and timid girl. Later, when the stimulus of novelty has passed away, the husband often performs intercourse in a manner more calculated to awaken his wife's sexual desires, but in seeking his own lordly gratification and obtaining it he is still apt to leave out of the reckoning the need for effecting coitus in such a way as will give complete satisfaction also to his wife.—*Dr. E. Heinrich Kisch.*

\* \* \* \* \*

*Medical Institutes and Quacks.*—Advertising quacks and quack institutes are a greater plague to this country than the cholera ever could be, and are probably responsible for more misery and deaths than is the terrible scourge of consumption.

In my specialty I see cases every day that make one's blood boil. A person has a little pimple on his genitals: It may be herpes, may be due to a little irritation or scratch, may be due to the bursting of a little blister, or to the itch. *If such a person gets into the hands of those advertising quicks, then the Lord have pity on him! Those gentry will frighten the life out of him. They will convince him that he has syphilis in the very worst form; and then will proceed to bleed the poor fellow as long as he has, or as long as they think he has, a dollar left.* But at the same time they will ruin his health and his stomach by nauseous medicines, pills and tablets—for they have to show him that they are giving him something for his money. I have had numerous patients, who came to me with the diagnosis of syphilis from the medical institutes and quacks, most of the sores proving nothing but mild abrasions or local irritations.

The same is true of gonorrhea. When these harpies get a gonorrheal patient, they torture him to death. They make him better, then they make him a little worse, then again better, over and over. And in spite of the so-called "guarantees to cure," when



the patient is no longer able or is unwilling to put up more money, he is kicked out, the door is shut in his face, and he is forbidden to come again. They know that, in spite of their written guarantees, no patient will be willing to go to court; and thus bring to light the fact that he has a venereal disease.

Very often when such a patient applies for treatment to a real physician, he is in a most deplorable condition. We find him suffering with gleet, chronic patches in the urethra, quite often strictures from the use of too strong injections, and so on. And it often takes many months to undo the damage wrought by those dastardly quacks.

The same is true of sexual disorders: These are of too complicated a character to be understood or diagnosed properly by the quacks, and still it is here that they reap their harvest. By advertisement, circular and booklets, they make our young men and boys think that every case of nightly emission or masturbation is a dangerous disorder which will send them directly to the grave or to the madhouse, and when they succeed in enticing a youth in their clutches, they not only rob him of his last cent, but they generally succeed in making a nervous wreck of him. And then his name and address are given to other quacks, and he is overwhelmed with other letters, other "literature," assuring him that they can *positively* cure him or it will not cost one cent; and so similar alluring offers with fake testimonials are showered upon him to the end of his days.

You know—or you may not know—there are letter-brokers who make it a regular business to sell letters from sufferers from various diseases to different quack concerns. These letters are carefully classified, with remarks as to the social and financial standing of the patient. *If you ever had the misfortune to become the patient of a quack, and he knows your right name and address, you may be sure that these will travel from quack to quack; in truth your name will go down to posterity.—Dr. William J. Robinson. (See last page.)*

\* \* \* \* \*

*The Dangers of Ignorance of Self and Sex.*—Parents are too often responsible for the degradation of their daughters. Mothers neglect properly to instruct them regarding the duties they owe to Society and the dangers inseparable from male companionship. They learn the sacred mysteries of reproduction

from "flip" girls who are "on the mash" and rather glory in being considered a trifle rapid, and are too often led upon the reefs before they realize that sexual purity is the noblest jewel of perfect womanhood—that when it is lost she is already dead and damned. They are permitted, when the demon of passion is first stirring in their blood, to "keep company" with gay young men beyond the maternal eye, to dance and flirt, and the logical sequence of such license is a coroner's inquest on one of their boasted "conquests," a military marriage or another addition to the demi-mondaines. If young girls left so unguarded do not go to perdition, no credit is due to their parents. Even if they pass the ordeal without debauchment of body, they are so debased in mind as to be forever unfitted for noble wifedom, for no man possessed of refinement equal to that of a scurvy ape will marry a maid who has been pawed over by Tom, Dick and the Devil. She's "damaged goods" the very moment she submits to the kisses and caresses of a man who does not make her the empress of his heart and home. All the perfume of the rose has disappeared—she has become entirely too promiscuous, too experienced. When a man learns that his wife delivered to him as a dowry a joblot of reechy kisses, collected of male acquaintances much as she might accumulate picture cards or cancelled postage stamps, he should be privileged to sear her slobber-trap with a red-hot iron and turn her loose to wander like a she-Cain through the world. Her sin differs in degree (but not in kind) from that of the common courtesan, and to a man of real refinement the degree is not so broad that it must be measured with an astronomer's instrument. True it is that virtue which must be ever guarded is not worth the sentinel; but the proverb applies to adults, not to young girls. A better plan which takes it for granted that an unmarried woman only awaits a good opportunity to go astray; or which assumes that all men are wingless angels, would be for the State to hold parents responsible for the purity of their daughters until the latter have reached the legal age of consent, and erase the word "seduction" from the criminal code. A woman rightly reared and carefully guarded until she is of marriageable age will never be "led astray" unless she furnishes the string. The wildest rake who ever went unhung will attempt no criminal familiarity with any woman unless she extends to him encouragement. No married woman possessed of sufficient intellectuality successfully to



evade the lunatic asylum was ever "seduced." When a wife goes wrong she should come in for at least one barrel of the shotgun if the wronged husband decides that a dirty drab is worth the price of an ounce of powder.—*Brann—The Iconoclast.*

\* \* \* \* \*

*Unsatisfied Sexual Desire as a Cause of Female Disorders.*—If a woman has a normal constitution she usually experiences the same desire of sexual gratification as man, and she must be approached with tender fondling by the man during the sexual act, without which feature it is brutal. As it is known that orgasm appears later in woman than in man, the husband should take that circumstance into consideration and consider it his duty to prolong the intercourse sufficiently for orgasm in the woman. It is, as a rule, possible for a man to do so, at least for the considerate one, who can under all circumstances learn to control to a considerable extent the time for ejaculation.

There exist marriages where the husband does not wish to have intercourse with his wife without her free, spontaneous consent, and considers it an injustice toward her if she does not also enjoy orgasm. Conviction of woman's need of sexual gratification may thus educate a man, if real love is present.

Absence of orgasm at the presence of sexual desire may have serious consequences, the physiological reason of which is very apparent.

An appetite has been excited without being satisfied, the entire sexual apparatus has been stimulated, ovaries, uterus and vagina are congested, but the irritation is not ended by the natural crisis. If this is often repeated the uterus finally becomes swollen, inflammation of ovaries and other organs appear, accompanied by pains, catarrh of vagina and uterus, ulcers on cervix, hemorrhages, etc. Finally serious changes take place and many claim that cancer of the uterus may be caused thereby.

Nature takes revenge, but man does not know that he has done wrong, and the attending physician often knows nothing about the cause of the ailment, as he has never been told the secret of the sexual relations existing between husband and wife.

Many women with female diseases are too modest to inform the physician about such details if he does not understand how to gain information by means of prudent questioning. Local



treatment is often resorted to where a constitutional cause is to blame, and it may do some good if it tends to allay the irritation, etc., but the regained health is easily lost again, and the treatment with baths, douches, cautery, massage, operations, etc., must be resumed.

Other consequences of unsatisfied sexual desire in coitus are the many different nervous diseases which are caused by the state of irritability of the genital organs, hysterics, epilepsy, melancholia, neuralgia, paresthesias, queer ideas and sensations, etc. Diseases of the female generative organs often manifest themselves by pain and other abnormal symptoms of distant organs, as neuralgia of the stomach, intestines, breast, face, teeth, etc.

Diseases of the sexual organs, as well as abnormalities of the sexual functions, are among the most common causes of nervous and mental diseases. Insanity and suicide are often the final outcome. It is not sufficient to state the presence of some "female disorder" as the cause of an abnormal mental condition or suicide. To understand the complication one must go further back and try to explain and discover the cause of this cause, etc. It is the same with many other diseases, as dropsy, heart trouble, kidney diseases, where it is important to take into consideration a general constitutional disease as the real cause.

Woman's health often suffers from the great injustice, the violation of woman's rights by man, who is so egotistic that he thinks only of his own pleasure in the sexual union.

Ungratified sexuality depends upon lacking knowledge of the art of loving, to which art pertains the quality of being kind and sympathetic in general and especially in the sexual act. One does not readily understand why interruption of the sexual act as a preventive is injurious. Just as woman reaches the height of sexual enjoyment, the orgasm, the act is interrupted and cannot be continued by the man, and for reasons already shown this is very injurious.

Many physicians have mentioned diseases caused by coitus interruptus and have described how health has been regained by complete coitus performed under protection of proper hygienic instruction.

Besides diseases of women caused by abstinence, which makes life miserable for husband as well as wife, there are other

dangers, viz., the revenge of womanly nature against its outrage; manifesting itself by indifference, dislike, disgust for the husband, and irritability of the sexual organs which persist in spite of all precautions and attempts to relieve it. Dissensions and misunderstandings appear, and new connections are entered into; divorce is often the finale, and the public judges harshly and unjustly, ignorant as it is of the real cause thereof. They may have shown very little of the real cause.—*Dr. Anton Nyström.*

\*   \*   \*   \*   \*

*Relation of Masturbation to Hypochondriasis.*—Some masturbators become much distressed, and reproach themselves for having spoilt their lives by their bad habit. They give way to lamentations before their doctor and their acquaintances, wring their hands with despair, and beg everyone to come to their aid. They look upon themselves as poor sinners whose lives have been ruined, either by their own fault or by others. They have read sensational books which excite both the fear and the sexual desire of weak characters, whom they are intended to exploit. *These poor devils believe themselves lost, and are truly pitiable objects. These form the types which are paraded as terrible examples in books on masturbation which make timid persons' hair stand on end.*

When these unfortunate masturbators are questioned on all the circumstances of the act of which they accuse themselves, we generally arrive at the following results:

We recognize that we have to deal with psychopathic or neurotic subjects more or less tainted by heredity, timid and shunning their fellows, easily impressed by imagination, possessed of unhealthy sentiments and ideas; in fact, hypochondriacs, predisposed to look upon every sensation or slight indisposition as a grave disorder threatening their health or life. They thus live in perpetual anxiety. This mental anomaly has for a long time preceded the masturbation, even if they have masturbated, which is often even not the case.

Among the numerous patients of this kind that I have treated, there were many who had simply had nocturnal emissions since puberty, but they regarded themselves as lost men through masturbation! Many others no doubt practice compensatory masturbation, generally because their timid nature prevents them from frequenting prostitutes, or committing other sexual excesses,



while the way in which they analyze their sensations easily leads them to masturbation. On the other hand, they are generally so afraid that they do not give way to excessive masturbation, perhaps only once or twice a week, or even less often, so that the normal frequency of coitus, according to Luther, is often not attained and seldom exceeded. Among these persons we find few precocious or excessive masturbators. I admit, however, that a hypochondriacal constitution predisposes somewhat to masturbation.

But, what I wish to lay stress upon, is that the masturbators who are full of lamentation and self-reproach are neither the most numerous nor those who commit the greatest excess. The worst masturbators, those who provoke several ejaculations daily, belong to the category of sexual hyperesthetics. These have not the classical aspect attributed to them by tradition; they are not pale and terrified creatures, but rather lewd individuals who are early transformed into impudent Don Juans. They may be as courageous, as clever and as strong as others and yet be disposed to all kinds of evil tricks and follies. *It is, therefore, not true, as is so often said, that it is possible to recognize a masturbator by his face and manner.*

These excessive masturbators no doubt do themselves harm in various ways, but the great error of taking sexual hypochondriasis for the type of masturbators, is to confound cause with effect. Sexual hypochondriasis is in no way the effect of masturbation, but precedes it, and masturbation is rather its effect, or is simply associated with it. It is obvious that masturbation, by its depressing effect, aggravates a mind beset with hypochondriacal anxieties.

It results from these facts, first, that a sexual hypochondriac should be treated as a hypochondriac and not as a masturbator; secondly, that the worst slaves of masturbation are not to be looked for among pale and dejected individuals.

Among women, especially young girls, hypochondriasis is not common, and cases of sexual hypochondriacs who accuse themselves of masturbating are rare among them. Women who masturbate generally keep their secret and are apparently very little affected by it. However, masturbation does them nearly as much harm as men; it is true they have no loss of semen, but the repetition and intensity of the nervous irritation are greater



than in man, and it this which causes most exhaustion. In spite of this, it is curious to observe that women who masturbate are generally less ashamed than men, and are apparently less depressed by it. We must bear in mind that the loss of semen by masturbation has in man a peculiarly depressing effect, for it lacks its object and represents an absolutely abnormal satisfaction of the sexual appetite.

It may be objected that this difference is due to another cause, that women who masturbate have less moral tone and are especially depraved individuals. I agree that this is often the case, but far from always. The intensity of the sexual excitability in women has nothing in common with their character; it may be associated with high intelligence, with high moral and esthetic qualities, and even with a strong will. On the other hand, deficiency in moral sense and will may occur with sexual frigidity, and, as we have already seen, may lead to sexual excess without any voluptuous sensation, in accordance with the peculiarities of feminine sentiment. These facts show how complex are the causes of a given effect in the sexual domain.—*Dr. August Forel.*

\* \* \* \* \*

*The Unspeakable Quack.*—The frauds that pay best of all are those based upon venereal diseases, real and imaginary. The scoundrels in this case usually resort to small pamphlets, purporting to set for the evils and horrors of “lost manhood,” self-abuse, impotence and sterility. This lurid and misleading literature is put in the hands of youths and even boys. Men are often paid to stand on corners near to schools and other institutions to hand pamphlets to the boys as they come and go. It is a great pity that so much ignorance prevails among young people in regard to matters of sex, and that parents are so backward and diffident about mentioning them to their children. If such instruction were the rule, instead of the exception, boys and girls would be forewarned and forearmed against real danger—*the danger that lies in ignorance*. The result is usually a morbid curiosity to learn more of this subject about which there is so much mystery. Such curiosity is always satisfied in time, but secretly, and often through the vilest of companions and associations.

The flaming literature of the quack at once arrests the attention of young men in this state of mind. The pamphlets are

worded with diabolical art and cunning. The most ordinary and commonplace conditions are twisted into pathological symptoms. By the time a poor youth has perused the tissue of lies he is about convinced that he must be somehow a victim of venereal disease, even though he may never have been actually exposed to it. And if, in addition, he happens to have varicocele, he sees no future but that of an incurable paralytic. But at last a ray of hope illumines his darkened soul. The final paragraph states that the writer—this altruistic being who consents to practice medicine solely in the interests of humanity—has discovered the sovereign remedy. The victims of “youthful errors” and “lost manhood” may rely on him and him alone to save them.

“Young men! Come to me, if you would be saved from the errors of youth!” Some such legend is conspicuous in nearly every public toilet, a bait for the ignorant and unwary.

But thousands of grown men, who ought to have better sense, patronize these charlatans for treatment of venereal diseases. And here is where one of the worst and most far-reaching evils occurs. A man engaged to be married has contracted venereal disease. He may have acquired it during the jovial, alcoholic wind-up of a stag party, or perhaps his moral standard is so low that he does not consider his engagement as binding him to shun vicious associations. In any case he is now badly frightened, and in desperate haste to get cured before the wedding day arrives. If sense has conquered shame he consults his family physician, and the latter strongly advises him to postpone his marriage indefinitely. For it takes not less than three years to cure syphilis, and at least six months to eradicate gonorrhea. Just at this time, however, our Lothario reads a quack pamphlet. Ah, this is just what he wants! “All venereal diseases cured to stay cured after a few weeks’ (or days’) treatment.” So he rushes off to the “specialist,” and puts himself in his hands. In a brief time, as the latter promised, the symptoms have subsided or become obscured, and the marriage consequently takes place. A little later, however, the innocent wife is a victim of the loathsome venereal disease of which her husband thought the quack had cured him.

The power and influence of the advertising quacks depend largely upon the complete ignorance of the general public in regard to all matters medical, anatomical and physiological. Very



few people know where the liver is. Several times, while treating patients for obscure or doubtful cases of a certain disease, I have been seriously asked: "Doctor, if I really haven't this disease, isn't there danger that your medicine might give it to me?" Absurd as is such a question, the enquirers have not always been fools. That it *could* be asked at all, and by persons otherwise intelligent, is a significant fact, and one that goes a long way towards accounting for the widespread and pernicious influence of the quacks.—*Dr. Norman Barnesby.*

\*   \*   \*   \*   \*

*The Closed Womb.*—Let us consider the girl whose monthly flow is scanty or entirely absent. She has arrived at the age of sixteen years and has not "seen anything." But every month, for a year or so, she has had headaches, felt extremely nervous, had some pains, the breasts have felt tender and sore, and altogether she has had a miserable twelve months of these symptoms, but no relief from a flow. What is the matter with such a girl?

A girl may have over-exercised or injured herself when she was twelve years of age or thereabouts, and brought about a little inflammation, which at the time she knew nothing about. The womb was already getting prepared to do its monthly work, and as the weeks went on the inflammation increased. Inflammation always means some kind of extra growth at the injured spot; like a scar, for example, after a wound has healed up.

The womb itself is not a sensitive organ to the touch or to slight inflammations at the lower end, hence the little girl does not, at the time, feel any pain. She may feel uncomfortable in that region, *but as she has been brought up NEVER to mention any matters concerning her sex organs, of course, she keeps silent while the injury goes on.* The little inflammation heals up, but in healing what does it do? Leaves a scar, of course. Now this scar may be big enough to have CLOSED the outlet for the monthly flow—to have made the entrance of the womb grow together. It is under these circumstances a sealed bag; nothing can come away from it.

The girl's time comes, but the blood does not. All the other signs being present, she watches and worries. Some times, alas! too many times, she has never been told just what should happen. Backache troubles her, headaches often drive her to take some



harmful drug, she becomes fretful, loses control of her temper in the simplest things and finally loses friends because she "is so horrid, says so many cutting things."

Yet she does not mean to be disagreeable; she simply cannot help it. How could she? There is a clot of blood in her womb that cannot come away; it remains and hardens and each month is added to by the banked-up blood.

It is a very sad condition, and one that often continues until a tumor is formed, or some other complication makes an invalid of her in the prime of her life—or what should be her prime.

This condition is frequently the cause of hysteria, of desperation, of a gradual mental failing.

There is another condition which goes to ruin a girl's health and happiness, for the effects are the same as in a closed womb. There is a membrane in all chaste girls called the hymen. This closes the entrance to the vagina. Now there should always be a little opening, or several little openings in this membrane to let out the blood. In some girls this is closed from birth; so completely closed and tough that the weight of the first monthly blood cannot break through it. Then we have all the symptoms of the stoppage we have in the closed womb, only the blood packs and hardens in the lower parts instead of the womb. Often this produces greater distress in the womb. Here great bloody tumors form and the state of the poor girl is certainly pitiable.

From birth also the womb may be closed, grown together. Then there are some girls so nervously constituted that the least touch on the muscles of the womb will shut it up spasmodically. Such a girl's womb is not grown together, but when the first drops of blood are trying to ooze away, the womb shuts tightly. In all these cases the results to the girl are the same as I have described.

The remedy for all this misery is simple, almost painless, and will not detain you from your duties but a few days; sometimes not at all. By simply cutting or snipping apart the growth at the entrance to the organ, or opening it by a little stretching instrument, the fault is remedied; the girl cured. And all this simple knowledge could have saved thousands of suffering girls and women. No! it does not interfere with your proof of virginity. The snipping is too slight. But supposing it should? What of it, as long as you know in your own heart that you are

a chaste girl? *Do you want to be a miserable wreck of a woman just on account of an ancient superstition, a foolish and harmful idea of a lot of old women and medieval theologians?*

It is a sad condition—this closed womb—and should not be allowed to sicken a girl for one hour—IF SHE KNOWS.

Alas! she has not been allowed to know these things—just allowed to suffer and be blamed.—*Dr. Wm. Lee Howard.*

\*   \*   \*   \*   \*

The *Menopause*, also called “the climacteric,” and in common language “change of life,” is the period at which woman ceases to menstruate. The average age at which this occurs is about forty-eight. But while some women continue to menstruate up to the age of fifty, fifty-two, and even fifty-five, others cease to do so at the age of forty-five or even forty-two. Between forty-four and fifty-two are the normal limits. Anything before or beyond that is exceptional.

Just as the beginning of menstruation may set in without any trouble of any kind, and just as some women have not the slightest unpleasant symptoms during the entire period of their menstrual life, so the menopause occurs in some women without any trouble, physical or psychic. The periods between the menses become perhaps a little longer, or a little irregular, the menstrual flow becomes more and more scanty, then one or several periods may be skipped altogether, and the menopause is permanently established. Many women, however, the majority probably, suffer considerable during the transitional year or years of the menopause. Symptoms are both of a physical and of a psychic character, but the psychic symptoms predominate. There may be headache, capricious appetite, or complete loss of appetite, considerable loss of flesh, or on the contrary, very sudden and rapid putting on of fat, great irritability, insomnia, profuse perspiration; hot flashes throughout the body, and particularly in the face, which make the face “blushing” and congested, are especially frequent. Then the woman’s character may be completely changed. From gentle and submissive she may become pugnacious and quarrelsome. Jealousy without any grounds for it may be one of the disagreeable symptoms, making both the wife and the husband very unhappy. In some exceptional cases a genuine neurosis or psychosis may develop.

*Cause of Suffering During Menopause.*—It is my conviction,

and I have had this conviction for many years, that many, if not most, of the distressing symptoms of the menopause are due, not to the menopause itself, but to the wrong ideas about this period that have prevailed for so many centuries. We know the influence of the mind over the body, and the pernicious effect which wrong ideas may exercise over our feelings. The generally prevalent opinion among women, and men for that matter, and not only of the laity but unfortunately of the medical profession as well, is that the menopause is the end of woman's sexual life. Every woman is laboring under the erroneous impression that with the establishment of the menopause, with the cessation of the menses, she ceases to be a woman, and as she does not become a man, she becomes something of a neuter being, neither woman nor man. And she has the idea that after the menopause she can have no further attraction for her husband or for other men. Naturally such an idea has a very depressing effect on any human being. Any human being fights to the last to retain all its human functions, especially the function which is considered as important as is the sexual function.

*Reproductive Function and Sexual Function Not Synonymous.*—Of course, with the permanent cessation of the menses the woman's *reproductive* function is at an end. But the reproductive function is *not* synonymous with the sexual function, I must insist again and again, and naturally until this erroneous idea is dispelled much unnecessary misery will be the lot of our women. If women in general will learn that with the establishment of the menopause they do *not* cease to be women, if they will learn that the sexual desire in women lasts long beyond the cessation of the menopause, many women being as passionate at sixty as at thirty, if they will learn that their attractiveness or non-attractiveness to the male sex does not depend upon the menopause, but upon their general condition, if they will learn that many women at fifty and sixty are much more attractive than some women at half that age, they will not take the onset of the menopause so tragically and they will thereby avoid the greater part of their mental and emotional suffering.

The actual atrophy of the ovaries, uterus, external genitals and the breasts can, of course, not be prevented, but that atrophy is a slow and gradual process, and is not in itself the cause of the various distressing symptoms that we have enumerated.



The treatment of the menopause, if the symptoms are at all disagreeable, or distressing, should be in the hands of a competent physician. A little wholesome advice may be more efficient than gallons of medicine and bushels of pills. In general the woman should try to lead as calm and peaceful a life as possible. Warm baths daily are beneficial, constipation should be guarded against, hot vaginal douches are often efficient against the disagreeable flushes, and last, but not least, the husband should during this critical period be doubly kind and doubly considerate of his wife. It is during the years between forty-five and fifty-five that the wife is most in need of her husband's sympathy and support.

*Increased Libido During Menopause.*—There is one rather delicate symptom which I must not pass unmentioned. Some women during the years while the menopause is being established, and for some years after the menopause, experience a greatly heightened sexual desire. In some cases this increased libido is normal, that is, no other pathologic symptoms or local conditions can be discovered. In some cases the increased libido is distinctly due to local congestion, congestion of the ovaries, the uterus, etc. In some cases, I can distinctly testify, it is psychic or autosuggestive. Because the woman thinks, and believes that other people think, that she is soon to lose all her sexuality, she unconsciously works herself up into a sexual passion which sometimes may be of long duration and may even lead to disastrous results.

What to do in such cases? Where the woman's libido is normal or near normal, then naturally it should be normally gratified. But if the libido seems to be abnormally strong and the demands for sexual gratification are too frequent, then the woman should be treated and sexual gratification should not be indulged in, because in these cases, as a rule, such gratification only adds fuel to the fire, and the woman's demands may become more and more frequent, more and more insistent. In exceptional cases it may even reach the intensity of nymphomania. In such instances the aid of a tactful physician is indispensable.—*Dr. William J. Robinson. (See last page.)*

\* \* \* \* \*

*Defective Menstruation.*—Many of the pathological conditions affecting the womb and its appendages depend upon the periodicity of activity manifested in the menstrual cycles, or are consequent upon tight-lacing, insufficient and improper feeding,

and want of exercise. The more common morbid conditions are malformations, inflammations, displacements, diseases, tumors and lesions; the latter being due principally to accidents and abnormalities of pregnancy and labor. Inflammatory mischief often arises from chill during a menstrual period, which in its turn may give rise to displacement. The various forms of displacement are: *Prolapsus*, or "falling of the womb," in which case the organ slips down into the vagina, some times so much so that it may become external; *anteversion* and *retroversion*, the tipping forward and tipping backward of the womb; *anteflexion* and *retroflexion*, when it is bent forwards or backwards upon itself. It is urgently advised that no woman suffering from uterine displacement marry without first obtaining the consent of her medical adviser.

Tumors of the uterus are exceedingly common, in many cases giving little or no trouble, while in others their size may cause distress from pressure upon neighboring organs, and sometimes may lead to severe and dangerous hemorrhage.

There are many other disorders and weaknesses of the uterine system, such as leucorrhea and similar offensive discharges from the vagina. Treatment depends entirely on the cause, but in all cases a toning up of the general system by means of diet and exercise should be the first thing to which attention should be paid.

Owing to the extensive and intimate connection and sympathy existing between the reproductive and nervous system, uterine disorders often give rise to nervous complaints, such as hysteria. Marriage will often effect improvement, or even cure, of many of the minor uterine disorders, but where such exist, it is always the more advisable course for the individual to consult a medical man before definitely deciding on matrimony, for so much depends on the nature of the disorder and its cause.

Displacement of the womb is a frequent cause of constipation, and it must be said that women suffer a great deal more from this complaint than do men. The genital organs of the female are, unlike those of the male, contained within a bony cavity, besides which the female has one organ, the uterus, which the male has not. The female pelvis, therefore, although broader than the male, is more crowded with organs, and it is obvious that the slightest pressure on the pelvic walls must crowd these



organs still more. Custom compels women to compress their waists with the corset, requiring them also to bear from the waist the weight of all their heavier garments, yet allows men to suspend their clothes from the shoulders. And yet man is so constructed that even considerable compression of his waist does him little harm compared to that which a very slight compression of the same region does to a woman. That women are the chief sufferers from constipation is, therefore, no matter for wonder. The pressure of the uterus upon the rectum—which, as has been explained, is the lower part of the large intestine—is certain to interfere with the functions of the latter. Pressure of the womb on the bladder, also, sets up irritation of this organ, besides leading to other complications. The bladder is capable of great distention; when moderately full, it holds about one pint, but cases have been known when the organ has held as much as twenty pints. Of course, any excessive distention of the bladder has the effect of interfering seriously with the functions of the other organs contained within the pelvic cavity. Women, unfortunately, are more guilty of the habit of resisting the physical desire to empty the bladder than are men; yet, for the same reason as that given above, the danger of neglect in this direction is far greater in this case.

*The prolonged retention of the poisonous contents of the rectum and the bladder results in the poison being re-absorbed into the system, circulating with the blood throughout the body, irritating the nerves, disordering the digestion, causing eruptions of the skin, overworking the kidneys and fouling the breath, for that which the bowels do not readily discharge, it is the function of the lungs, kidneys and skin to undertake to get rid of.*

With the long series of evils which may arise from pathological conditions of the uterus and its appendages, must be included the interference with the regular recurrence of the menstrual periods, and the almost inevitable results which a stoppage of the menses has upon the general health. Besides the conditions mentioned above, there are others which may interfere with the natural function of menstruation; cold, intense mental excitement, excessive emotion; it behooves every woman, therefore, to exercise great caution and care as the time for the monthly period approaches. Apart from the non-appearance, or sudden cessation, of the discharge, the most usual symptoms of arrested



menstruation are severe pain in the uterine region, gradually extending over the entire abdomen, down the thighs and legs, even to the feet; or the pain may travel up the spine to the head. Nausea, fever, shivering fits and headaches may follow. The best remedial course is for the patient to take a hot sitz bath, sipping some hot drink, such as ginger, peppermint or cinnamon tea, afterwards getting into a well-warmed bed. Of course, it is essential that the bowels be first attended to. We would warn our readers against the female pills and remedies which are so much advertised. These drugs are mostly poisonous, their action being brought about by the antagonism and antipathy of the system to whatsoever is abnormal, injurious or non-usable.

*It must be mentioned that there are some women, more especially girls, who will deliberately employ artificial means to delay or check their menses, a desire to attend some social function, such as a dance or a picnic, being the usual occasion. The fearful risks of such an attempt would seem to be sufficiently obvious; but the ignorance of some women regarding even such matters is so great that they do not hesitate to make the attempt whenever the condition would be inconvenient to them. It is not that mothers do not tell their daughters of the dangers of such a course; but, where ignorance exists of the why and wherefore such a practice should be dangerous, a mere warning, however solemnly delivered, is not sufficient to deter a girl who values social pleasures above that which is to her nothing more than a little discomfort. Think of the number of women who regard irregularity in recurrence of the menses as a mere habit peculiar to some women, and a matter, therefore, of very little import! It is certain that any girl, fully comprehending the physiology of menstruation, would as soon swallow a dose of poison as attempt to interfere with the regular appearance of her menses.*

“The foundation of menstruation is the prime law of womanhood and any attempt to check or interfere with its natural course is unwomanly and unclean, besides being dangerous in proportion as it is successful.”—*Dr. A. A. Philip.*

\* \* \* \* \*

*Leucorrhœa — The Whites.* — Leucorrhœa means literally a “white running,” and is applied by the laity to any whitish discharge coming from the vagina. This is wrong, because some

white discharges may be of little importance; others may be of a serious character, and not be leucorrhea at all.

Leucorrhea is one of the banes of the modern girl and woman. It is very frequent. Probably at least twenty-five per cent (some say fifty or seventy-five per cent) of all women suffer with it in a greater or lesser degree. In some cases it is only an annoyance, necessitating the frequent changing of napkins, but in others it causes a great deal of weakness, backache, erosions, itching and burning. It is very resistant to treatment, particularly in girls. The reason it is so resistant to treatment is because the discharge, while coming from the vagina, *does not usually originate* in the vagina; it originates in the neck of the womb, and the hundreds and hundreds of injections that women take for their leucorrhea only reach the vagina; they cannot penetrate into the womb. And it is only by treating the cavity of the cervix, which can only be done by a physician, through a speculum, that the root of the trouble can be reached. And, if any erosion or ulcer is noticed, it can be directly touched up with the necessary application. And it is for this reason that in girls leucorrhea is so much more difficult to treat. For fear of having the hymen ruptured the girl objects to a thorough examination and to local treatment, and the leucorrhea is permitted to proceed until perhaps a chronic inflammation of the womb and the Fallopian tubes is established. There is no doubt that many cases of sterility or childlessness in women are due to long-neglected leucorrhea in girlhood.

*What Is the Cause of Leucorrhea?* We can answer simply: the cause of leucorrhea is catarrh in any part of the female genital tract. But this is no real answer. What are the causes of the catarrh? The causes of catarrh are many: The most common cause is a cold. Wetting the feet and getting chilled, particularly during the menses, may set up a catarrh in the cervix. Long standing on one's feet, lifting and carrying heavy bundles, dancing in overheated rooms and then going out scantily clad in the chill night air, prolonged ungratified sexual excitement, lack of cleanliness in the external genitals—all these are factors in setting up a catarrh of the cervix with a resultant leucorrhea. A general rundown condition, worry, overwork, too-hard study, lack of fresh air, and a general scrofulous condition also favor the development of catarrh of the womb and leucorrhea. It will therefore

be seen that the treatment of leucorrhea to be successful must be general and local.

*General Treatment.* The general treatment consists in general hygienic measures and in common sense. The patient should not be on her feet more than she can help, and she should not walk until exhausted or fatigued. It is better to take several short walks than one long one. The corset she wears, if she wears any at all, should be of the modern kind: not one that presses the womb and the other abdominal organs down, but one that supports the abdominal walls, and rather raises the contained organs up. The lacing or buttoning must be from below up, and not from above down. That it should not in any way interfere with the freedom of respiration goes without saying. Constipation, if any, to be treated, must be treated intelligently, by mild measures, and care must be taken that the bowels move at regular hours. Where the leucorrhea is due to or is aggravated by anemia and general weakness, a good iron preparation, such as one Blaud's five-grain pill three times a day, or a tonic of iron, quinine and strychnine, will do good. A daily cold bath or cold sponge, followed by a brisk dry rubbing with a rough towel, is also useful.

*Local Treatment.* Local measures consist in painting or swabbing the vagina and cervix with various solutions, of tampons, suppositories and douches. Local application to the vagina and uterus can be done satisfactorily by the physician or nurse only. The insertion of a suppository or douching can be easily done by the patient herself.

While it is always best and safest to consult a physician, and, while self-medication is generally inadvisable, there are occasions when a physician is not available; in some small places a woman may, *for various reasons*, have a strong objection to gynecological examination and treatment; and some women may be too poor to pay the doctor. In such circumstances self-treatment is justified and there can be no objection to it if the remedies are harmless and are sure to do some good; that is, to improve the condition where they do not effect a complete cure.

One of the simplest things is an alum tampon. You take a piece of absorbent cotton, about the size of a fist, spread it out, put about a tablespoonful of powdered alum on it, fold it up, tie a string around the center, insert it in the vagina as far as it will



go, and leave it in for twenty-four hours. Then pull it gently by the string and syringe yourself with a quart or two quarts of warm water. Such a tampon may be inserted every other day or every third day, and I have known many cases where this simple treatment alone produced a cure. In many cases, however, douches work better and the two best things for douching are tincture of iodine and lactic acid. Buy, say, four ounces of tincture of iodine, and use two teaspoonfuls in two quarts of hot water in a douche bag. This injection should be used twice a day, morning and night. Of the lactic acid you buy, say, a pint, and use two tablespoonfuls to two quarts of water. The lactic acid has the advantage over the tincture of iodine that it is colorless, while the iodine is dark and stains whatever it comes in contact with. Sometimes I order the use of the tincture of iodine and the lactic acid alternately, for one douche the tincture of iodine, for the next the lactic acid, and so on. When the condition improves, it is sufficient to use one teaspoonful of the tincture of iodine and one tablespoonful of the lactic acid to two quarts of water. These injections are quite efficient and have the advantage of being perfectly harmless. One point about the injections: they should be taken not in the standing or squatting position (in which position the fluid comes right out), but while lying down over a douche pan. The douche bag should be only about a foot above the bed, so that the irrigating fluid may come out slowly; the patient, after each injection taken in the daytime, should remain at least half an hour in bed (in the night time she stays all night in bed). This gives the injection a better chance to come in contact with all the parts of the vagina, and a portion of it comes in contact with the cervix, where it exerts a healing effect. *Avoid the use of patent medicines.—Dr. William J. Robinson. (See last page.)*

\* \* \* \* \*

*The Lie of the Wild Oats.*—The belief is quite general that every youth of stamina “must sow his wild oats.” Some go so far as to say that he cannot amount to anything unless he does sow more or less of them. Many women have been heard to say that penitent *roués* make the best husbands, not recognizing the fact that where one man is strong enough to overcome his evil experiences, a hundred are wrecked, morally and physically.

That the average young man sows more or less wild oats is indisputable. That the more substantial and manly men are often the ones who have paid particular attention to their sowing is true. That some men who never sowed any were not much to begin with is also true. If fear, or lack of animality, had not been more prominent in such men than in their erring brothers, they would have joined their ranks. That some "goody-goody" young men, who never have been tempted, fall into evil ways later in life cannot be denied. That penitents often make good husbands is a matter of common observation; whether they have been scared into good behavior or have simply matured in judgment matters not. On the other hand, many young men who might have been ornaments to society have been ruined for life by wild oat sowing. That any youth is better for wild oat sowing, save where its terrible results bring a naturally weak and vacillating character to his senses through mental shocks, is false. "Boys will be boys," they say. Yes! and dogs will be dogs; but this does not lessen the deadliness of hydrophobia. The wild oats' doctrine was probably invented by some fake social philosopher, who had sins of his own to apologize for and no diseases acquired by early indiscretions to modify his opinions.

Almost every boy at some time in his life is taught by his elders the "Lie of the Wild Oats." His father and grandfather learned it before him and followed where it led. The man who escapes its dangers does so by great good luck, or by virtue of a strong organization, moral, mental and physical, that nothing can shake. That any man who sows can altogether escape reaping is a fallacy. Physical, mental or moral scars remain, and while the world may be satisfied with him, he is never satisfied with himself. Man's sexual lapses in after-life are often due to his chasing some mental will-o'-the-wisp; some youthful experience which, like the circus of his boyhood, seems ideal.

Impressions made upon the highly sensitive sexual brain centers of youth at a period when the emotional organization is especially impressionable leave a memory that overshadows all its future life as a false ideal—an ideal which is merely a reflex from a mental scar that will never fade nor become dulled in sensitiveness so long as physical sexual capacity remains unimpaired.

Should youth be exposed to debauchery to strengthen it?

Most emphatically, No! If youth were protected from wild oats influences until its judgment was mature there would not be so many brands to be plucked from the burning. For the benefit of those who accepted the "wild oats" conception of the male ideal, here are a few pictures that are only too familiar:

*Picture 1.* A certain health resort—the sinkhole into which a large part of the immorality, crime and disease of America is dumped—there are a hundred thousand visitors annually. Of these, a large proportion go there to harvest their "wild oats" crop. He who visits one of the government "râle holes" can best appreciate the harvest of the "wild oats."

*Picture 2.* A hospital. Here is a group of locomotor ataxics; there a group of deformed children; yonder, a girl in her teens is nursing a child who never will know its father. More "wild oats."

*Picture 3.* An asylum. Here is a case of general paresis; there a melancholiac; in the next room a maniac can be heard shrieking. "Wild oats" aplenty.

*Picture 4.* A police court, full of drunks, criminals and bums. "Wild oats" again.

*Picture 5.* A jail. Here are "wild oats" of the striped, short-haired variety in abundance.

*Picture 6.* A foundling asylum full of children cursed by Society before they were born as "bastards." Poor little "wild oats!"

*Picture 7.* A doctor's office, full of anxious men and still more anxious women, who do not gossip much about their ailments, even among their intimates, save where the women are told by the doctor a pretty little fairy tale for home use. "Wild oats" growing in the dark.

*Picture 8.* A brothel. Around the "reception room" sits a collection of poor female creatures, many of whom were originally sacrificed in aiding youth to sow its "wild oats." These women are now getting poetic revenge, as the doctor knows.

*Picture 9.* A beautiful girl is found dead in the river one fine morning. What is she doing there? Washing the "wild oats" out of her life.

*Picture 10.* A pistol shot rings out in a gambling hall—a man falls dead. The gun was loaded with "wild oats."

*Picture 11.* A defaulting bank cashier flees to Canada; he is looking for a market for his "wild oats."





DR. G. FRANK LYDSTON

Eminent Physician, Sociologist, Lecturer and one of the pioneers in the field of Social Hygiene.



*Picture 12.* A series of deserted babies found in the snow. Who planted them there? Sowers of "wild oats."

*Picture 13.* A wife, surrounded by her cold and hungry children is sitting weeping—eating her heart out. The husband and father is on a drunk; he has whipped her, is in jail, or has deserted her. "Wild oats" make broken hearts; they are poor food for babies; they do not buy coal, nor cover nakedness.

*We doctors know the wild oats crop under numerous terms. Crime, inebriety, syphilis, paresis, locomotor ataxia and gonorrhea are chief among them. What the consultation room does not tell us the operating table does.* Youths would better look at the specimens of disease taken by the surgeon from innocent wives, and see how they tally with the "wild oats" of some husbands' youth before they begin sowing their own.

There are thousands of syphilitics and tens of thousands of gonorrheics in every large city in the world. *Add to these the other wild oats products, crime, pauperism, prostitution, inebriety and insanity—all the conditions of degeneracy—and we can never offset the frightful record with an occasional brand plucked from the burning or with the "burnt child who dreads the fire."*

The "Lie of the Wild Oats" is based upon the misapplication of the theory of a separate standard for men and women. The young man may sow his wild oats, but the young woman must not. The sowing of the wild oats by the one, however, necessitates the co-operation of the other. What made the thousands of prostitutes in every great city? What supports them? What keeps the supply equal to the demand? Largely "wild oats." Wherever immorality, vice, disease, crime, drunkenness and insanity most thrive, there, if we dig down to the very root of these evils, we find "wild oats" the thickest.

*The maimed gray-beards who learned the wild oats lie from Society's primer are usually willing to confess that the "wild oats" of yesterday are watered with the tears of today. The vicious roots of the "wild oats" of youth often lie deep in the ashes of manhood's and womanhood's despair. The crop is garnered with the sickle of regret and threshed with the flail of disease and pain.—Dr. G. Frank Lydston.*

\* \* \* \* \*

*Superstitions of Pregnancy.*—There are many superstitions concerning pregnant women. Many women have heard it said

that events which make an impression on them during the child-carrying stage affect the child, such as the sight of disagreeable objects, the sight of a fire, the sight of a mouse. It is felt that these things affect the child either as to its nervous state or by leaving on various parts of the body imprints like the object seen, hence birthmarks and dark red discolorations are considered to be the result of such influences. It is also said that disagreeable things that the woman experiences, things that make her unhappy, or worried, act injuriously upon the child.

Of course, it must be stated that to whatever degree a mother's health be injured while bearing a child, to that degree the nourishment of that child may be impaired. But it must not be forgotten that, after all, the fetus which the mother is carrying in the womb is a little being encased in an egg-shell and floating in fluid. There is no direct channel, of a nerve nature or any other nature, between the mother and this little ovum with its contents. The only connection is through the medium of the blood, and the entire purpose of this blood is to come into contact with a certain part of the egg-shell and thus feed and nourish this ovum, and then when the ovum has within it a little embryo large enough, the blood of the mother exchanges its product with the blood of the fetus, not directly blood to blood, but substances pass from one to the other through intervening cell layers. The egg, including the little fetus, is the product of the union of one cell of the male and the egg of the mother. Whatever that egg of the mother was at the time it was joined by the cell of the father; whatever that cell of the father was when it joined the ovum of the mother, these create the new being. It is the result of the various elements and potentials existing in these two cells. Hence it may be said that at the moment when the ovum is fecundated, at that moment the destiny of that particular embryo is settled.

Why various children of the same parents, even twins, differ so much is a matter which we cannot decide. It is true that the reaction of one cell on the other produces in successive children of the same parents different combinations in the way of appearance, nature, etc., but those combinations, after all, can be recognized, in the course of time, to be the result of the forces, powers and potentials existing in either one or both parents or their progenitors.



This holds true of **color**, this holds true of height, this holds true of size, this holds true of peculiar deformities or peculiar marking, peculiar characteristics, facial or otherwise, which exist and characterize certain families. This holds true in different races; the evidences are too numerous to be mentioned. This is an absolute fact.

Any ideas which we have heard or read or learned which suppose that the sex of the child may be regulated by any procedure as to the union of the male and female elements have proven so far to be without foundation. Why sex follows one course or another in different families—the male predominating in some, the female in others, or the divisions being equal in others—we do not definitely know.

Many other ideas are erroneous, such as that the position in which a woman sits has an influence upon the position of the child. I have heard it frequently said that women should not cross their legs. The only reason that I can imagine for this is that in the later stages it may be possible that this position might, by pressure against the abdomen, influence to a slight degree (although I cannot believe to be very important) the position of the head, which is usually found below.

Other ideas are to the effect that one should not stand on a step-ladder and lift; that one should not reach upward or hang pictures because that is supposed to injure the position of the child. Whenever a child is born with a twisted cord, or found to be dead within the uterus because the cord has been twisted in a knot, one may always find that the patient has done something which, if the imagination so wills, may be held responsible for this accident. As a matter of fact, such accidents as the cord being around the neck of the child, or knots in the cord, are due to the fact that the embryo within the uterus, especially if plenty of water be there, is constantly moving about, changing its position, particularly in the early months, and the wonder is, not that this occurs so often, but that it does not occur more often.

Another notion is that the appetite for food which the patient exhibits during the child-bearing stage has a marked influence on the child. My observation shows me that many patients who eat very well have small children, and many patients who eat very little, either because they are small eaters or because they have not been well during the early months of pregnancy, have very

large children. I believe the size of the children depends almost entirely on the matter of inheritance, and I do not believe that starving the mother or diminishing her food supply very greatly will always bring about the development and birth of a small child.

A fact which I desire to reiterate is that the fetus, and this includes the egg shell in which it grows, is the product of the union of two cells. Each of these cells represents within itself potential forces. That means inheritance, too, through the individual father and through the individual mother, and as the degree to which these forces react on each other in the union of these two cells is a matter which no one can foretell, it constitutes a question under the heading of heredity.

This matter has a rather important bearing, because it frequently happens that young women, in their first pregnancy, overhear many opinions which are foolishly expressed. They hear the "fixed ideas" of people who have heard things, or who have "experienced" these wonderful phenomena in their own cases, and a great deal of worry is caused these young patients. They imagine or fear that something terrible may happen to their progeny owing to various errors they are supposed to have done, or in errors of diet, or in any accident which has occurred, or in the frightful things which they may have seen or heard.

During the child-bearing stage, a woman's mind should be as free as possible of worry about senseless and foolish things. It should be fixed in happy lines, simply for the general effect that it has on the patient's system and the patient's welfare.

Wholesome food, plenty of exercise, good sleep, and freedom from mental worry are important factors in sustaining the nourishment of a patient, enabling her to approach the period of lying-in with a great deal of confidence and freedom from imaginary dangers. These things are all-important, as said before, from a general standpoint, as regards the patient's condition, as regards her nervousness, as regards the courage with which she approaches the period of labor. Hearing of the accidents which have happened to other people during their child-bearing stage or during their labor, hearing of the various accidents which have occurred to babies, all have a bad effect on the nervous state of the individual. It is the same as with a surgical case. The more free from worry a patient approaches the operating table, the better her system sustains the shock of the operation, even if

simple, and certainly the shock of operation, if the procedure be a severe one. The same thing holds true with a lying-in patient. It makes it easier for the patient, it makes it easier for the nurse, and it makes it infinitely easier for the physician. The best form of "twilight sleep" of which I have any knowledge is the total freedom from worry about senseless and imaginary conditions.—  
*Dr. Samuel Wyllis Bandler.*

\*   \*   \*   \*   \*

*Frigidity in Women.*—We apply the term "frigid" to women who have little or no sexual desire, or who are incapable of experiencing any voluptuous sensation during the act! The two, *i. e.*, lack of libido and inability to experience the orgasm, may and often do go together, but not necessarily so. That is, a woman may have very little sexual desire, and still be able to enjoy intercourse when she does have it; and on the other hand, she may have a strong sexual desire and be utterly incapable of experiencing any orgasm.

Is frigidity in women frequent? Yes! quite frequent. Very much more frequent than the same condition is in men. I am aware of the fact that some medical writers and some radicals are trying to make us believe that there is practically no difference between the manifestations of the sexual instinct in man and in woman. I decidedly disagree with this view and I claim, (1) that lack of libido or frigidity is present in a much larger proportion of women than of men; (2) that the sexual instinct awakens in women much later than it does in men; (3) that the libido sexualis is much less developed and plays a lesser rôle in women than it does in man, and (4) that continence in women, for not too long periods, is much more feasible than it is for men.

I know full well that there are girls and women as passionate as any man can be—and more so; I know that in some girls the instinct awakens very, very early and occupies their entire life; but these are exceptional cases, and do not militate against my general statement. I admit also that women are very fond of the company of the opposite sex, and feel the need of being loved, petted, fondled and caressed even more than men do, but this feeling differs to quite a degree from the "gross" act of sexual intercourse. This is not the place to go into a detailed discussion of the differences in the sex instinct in the male and female, but these two facts may be brought to the reader's attention: There



are any number of girls who go on to the age of 18, 20 and 25 without as much as a sexual stir. No purely sexual longings, no night emissions, no masturbation. They live as calmly up to that age as if there were no sexual instinct. And such girls are perfectly normal. When they get married they manifest a sex instinct, healthy in every respect. We find no such instances among normal young men. The instances of young men who had no sex manifestations up to the age of 18 or 20 are exceedingly rare, and when found they are instances of young men of very weak or abnormal sexuality; young men who will never be any good sexually. Another fact well known to any sexologist is the following: There are many married women who for the first few years of their married life have very little sexual desire and experience very little or no pleasure in the act. It takes them several years of experience and "education" before they "wake up." There are no men who require several years of sexual education before their instinct is awakened. The normal boy's instinct needs no education and no guidance. These two facts point out sufficiently that there is quite a difference of degree, if not of kind, between the sex manifestations in the two sexes.

Leaving out of consideration the women who *loathe* intercourse, or the embrace or even the mere approach of a man, and who are probably in most cases homo-sexual, there are many cases that have absolutely no desire and no pleasure. They do not loathe the man, they may even respect and love their husband, but with the best will they can not get up any sexual desire. A man is to them an indifferent object. The sexual act is devoid of any pleasure to them, and no matter how frequently repeated they fail to experience any orgasm or even any pleasurable sensation. Some of these cases are congenital and unamenable to treatment. Others are suffering only from retarded development, that is for some unexplainable reason, the ovaries, clitoris, etc., are in an infantile condition, and the woman reaches her full sexual development only at the age of 25, 28 or 30, or even later.

Aside from these cases of complete frigidity there are milder cases, where the woman has merely a weak sexuality, and needs sexual satisfaction only once in two, three or four months. Others are indifferent, they can indulge frequently and enjoy the act fairly well or in a fashion, but they can also go without any indulgence for years, without feeling any the worse for it. To some

women—with a perverted education, or rather a perverted sense of propriety, the act appears as a nuisance. They like the preliminaries of the act, they experience some orgasm, but they do not like the manner of action.

We must bear in mind, however, that a very large percentage of frigid women are frigid only because their husbands are awkward and ignorant. Very often a little instruction to the husband converts an allegedly frigid, sexless wife into a very normal, even passionate wife. And it happens that a wife who passed for frigid with one husband is complained of by the second husband as passionate and even too exacting. Frigidity may also arise from dislike of or hatred of a certain man. A woman may involuntarily freeze sexually at the attempted touch of one man and melt away at the approach of another. I am speaking here of the purely physical act. Such cases we might designate as psychic- or pseudo-frigidity.

*The Treatment of Frigidity.*—The treatment of frigidity is more a matter of common sense and skilled judgment than anything else. For the congenitally frigid woman very little can be done. The treatment will also be much more efficient in women of the well-to-do classes who can afford leisure, luxuries, travel, amusement, the best kind of food, etc., than in women of the poor classes, who have to do hard work, can afford no extravagances, and have no romance in their lives. Very often in cases of female frigidity the person to be instructed or treated is not the woman, *but the man*.

The diet should be rich and generous, with a large percentage of proteids. Eggs (preferably raw), meats, fish, oysters, caviar, should be consumed liberally, with plenty of condiments. Hot baths, occasionally with a little mustard, before going to bed are decidedly efficacious.—*Dr. Wm. I. Robinson.*

•

PART III  
SEX TRAGEDIES





## INTRODUCTION

*THE third part of "Sex Searchlights" is devoted to Sex Tragedies. The theme which binds these several cases together is that of "Ignorance of Self and Sex."*

*They are selected to present forcibly the lesson that the tragedies of life are tragedies, mostly, of ignorance, especially in the case of sexual disaster. And the greatest tragedy of it all is that they are preventable. There never has been need for youth not to know—the only reason has been that people have shirked a great responsibility, either out of their own ignorance, or because of a mistaken or criminal modesty. Sex is the most beautiful thing in life, or, it can be the most ugly. Why then should we not tell our young people the truth that saves from evil?*

*Included also in this part is a letter written to a godson when he was eighteen years old which is one of the very best "sex talks" for adolescent boys and it is to be regretted that every boy reaching the threshold of manhood hasn't a god-father, father or teacher to bring him face to face with such protective knowledge coupled with high ideals.*

## THE STORY OF ROSE AND EDWARD\*

MISS ROSE M—— was a little over twenty-two. She was a bright, cheerful, happy girl, and this was her happiest day. Not only because on that day she was graduated from Barnard with high honors, but Edward—dear Ed, whom she had loved and looked up to for so many years—had proposed last night, and the passion, romance and aroma of that proposal still lingered with her. And how the plans and hopes and dreams kept chasing each other in her active, fertile brain. She had decided where they would live, where they would spend their summers, how she would bring up her children, etc., etc. And Ed was a husband to be proud of. Tho but twenty-eight years old he had already achieved eminence in the legal profession, and his practice was more than he could attend to. And he was one of those rare specimens, a truly honest lawyer. Not honest in the legal sense, but honest in the true human sense. And kind-hearted, a gentleman in the noblest sense of the word and an all-round athlete. A man to protect a woman from every possible care and to make her happy as long as she lived. So thought Rose, and she was right.

They were married in October. They expected to stay away three months on their honeymoon, but they returned after about three weeks. Rose was not feeling well, and traveling and staying in hotels didn't agree with her. She looked rather tired and fagged out, but that was natural. It was not natural, however, that after a week's rest she did not show any improvement. On the contrary, she began to look somewhat haggard. She had a little irritation in the genito-urinary tract, increased frequency of micturition, etc., but as this is not unusual in newly-married women, it was not considered of sufficient importance to consult a physician. Things continued this way, getting a little better and a little worse, until the beginning of January. On the fifth of January she was taken violently and dangerously ill. Severe abdominal pain, very rapid but hard pulse, and threatening collapse. The physician who was called in diagnosed the case as ruptured tubal pregnancy. A consulting surgeon was called in and

---

\* Dr. Wm. J. Robinson in *Never-Told Tales*, The Critic and Guide Co., New York City. (See Adv., last page.)



it was decided that in order to save the patient's life, an immediate operation was necessary. And tho it was midnight, the patient was quickly removed to ——'s Private Hospital and operated upon. No signs of extrauterine pregnancy were discovered, but about three and one-half pints of a blood stained and somewhat purulent serum removed. An examination of this serum demonstrated the presence of millions of gonococci. We had to deal here with a case of fulminant gonococcal salpingitis. Both tubes were thickened and inflamed and they were removed. And so was the now useless uterus. The operation was a "success," *i. e.*, the patient recovered.

A confidential talk was had with Mr. Edward. He searched his memory for a while—yes, some two years ago he had a very mild attack of—he did not know whether it was gonorrhea or something due to a "strain." It was very mild, it didn't bother him much, he went to his physician who gave him an injection and he was all right in three or four weeks. He never attached much importance to that attack and it had escaped his memory entirely. An examination of his urine, however, demonstrated the presence of shreds, and while no gonococci could be found in the urine, they were demonstrated in the expressed secretion from the prostate and seminal vesicles. The despair of Mr. Edward at learning that he was the unwitting cause of the tragedy can better be imagined than described.

Rose recovered, but you would hardly know her if you saw her. She aged ten years in ten weeks. She is making no plans, she has no hopes. she is dreaming no dreams—not for the present at any rate. Never again will she be the happy Rose that she was before she became Mrs. Edward. *Never will her home be gladdened by the noise, romp and laughter of little children.*

Who is to blame? Nobody. Rose certainly is not, nor is Ed. For he certainly would have had his right hand cut off—and his left one too—rather than cause the woman whom he loved above all else in the world any pain or suffering. But he "didn't know," and we cannot be blamed for things that we do not know, and that we never were told that we ought to know. *Should we blame those who insist that all knowledge of sexual matters be kept away from the people?* Perhaps, but even they are more to be pitied than blamed. For they are generally sincere in their beliefs and we cannot blame them for their ignorance.

No, nobody is to blame, *but it is the duty of those who see the light to spread the knowledge of sexual matters and of the dangers of venereal disease before people, so that tragedies like those that have struck down our friends Rose and Edward may become rare or impossible in the future.*

It would be an excellent plan if every man who indulged in promiscuous relations, no matter how rarely, had himself thoroly examined before marrying. This even if to his knowledge he never had gonorrhea. For there are gonorrheas without any subjective symptoms, gonorrheas in which the gonococci remain dormant, only to awaken into virulent activity at the first opportunity. And newly-married life is such an opportunity.

## THE CASE OF IRENE LARRABEE WEST\*

I HAVE been the Larrabees' family physician for many years. I pulled little Irene thru an attack of diphtheria, scarlet fever and measles. That was before she reached her seventh year. Since then she was never sick. She became very robust and loved outdoor sports. She was normal, healthy, not highstrung, and looked at life with prosaic eyes. She was a passionate novel reader.

At 18 she became engaged to a certain Mr. West, a lawyer from Atlanta, Ga., who attended to her father's affairs in that section of the country and who came on occasional visits to the Larrabees. At 19 she married. We were sorry to lose her, to miss her prosaic, healthy face and cheerful laugh, but she left her paternal home with a light heart. She wanted to be a mother. She loved children. She promised to come home on frequent visits. *She didn't.*

Today I was called in to see her—to see Mrs. Irene West, née Larrabee. Is it really one and the same person? It is hard to believe. And still it is so. It is nearly five years since I saw her last—when she left for her honeymoon and went to live with her husband in Atlanta; and I have but seldom heard of her. Mrs. Larrabee told me that she heard from her daughter but rarely, that she was not feeling very well and she was afraid she was not very happy. Mr. West was so nice and kind and gentlemanly and she couldn't account for it.

I spent about half an hour with Mrs. West and I could account for everything. When I came in Mr. West called me aside and told me he thought his wife was very sick, and what was worse, he thought she was addicted to morphine. I was shocked and somewhat incredulous. I knew Irene was not one to lightly become addicted to anything. She had never tasted a drop of alcohol, had never been given an opiate, and there must have been some very peculiar reasons to have made her a morphine habitué.

I examined her. Her legs and arms were full of needle pricks, the face bore a suffering, humiliated expression. I gave

\* Dr. Wm. J. Robinson in *Never-Told Tales*, The Critic and Guide Co., New York City. (See Adv., last page.)



her a thoro gynecologic examination; then I had a confidential talk with her husband, which made the cold sweat come out on him quite profusely, and what he suspected, and what several doctors hinted at, became a certainty. Some ten years ago a gonorrheal urethritis. He treated it for a year or more and thought he was radically cured. He remained continent for over a year before getting married—the entire time he was engaged to Miss Larrabee.

About two or three weeks after the wedding she commenced to complain of certain symptoms, which, to me, pointed to an acute gonorrheal infection. A Dr. G., who had been the West family physician for years, and in whom Mr. West's mother had great confidence, was called in. I investigated that doctor and found that he was an illiterate ignoramus. He had never attended any college. He ordered some strong bichloride of mercury injections. The condition became worse. Soon the pains became very severe, both in the bladder and in the sides. Then Dr. G., at his wits' ends, began to feed Mrs. West on morphine and give her morphine injections. He treated her in this way for a year. Her condition gradually became aggravated. Finally it was decided to call in another doctor. She was curetted and curetted again. Her condition gradually became worse. Double salpingitis and oöphoritis was diagnosed; the condition became so critical that an operation was decided upon. The seriousness of the operation was fully explained. Then Irene rebelled. She said if she was to undergo a serious operation she wanted to have it done at home and wanted her own doctor to do it. And here she was. *Yes, an examination corroborated the absolute necessity of an immediate operation. She had to become asexualized, and her intense maternal instinct was never to become satisfied, her hunger for a child was never to be appeased.*

She was operated on two days later. "The operation was a success," but the patient hovered between life and death for seven or eight weeks. She is in fair health now, but is constantly brooding and melancholic. Somehow or other the true cause of her condition, which for five years was a secret to her, is a secret no longer. How she found out, nobody can tell. But there is a marked change in her relation to her husband. He feels guilty and downhearted. Her life is ruined forever, and the household can never be a happy household.

*It would be very daring to suggest that fathers should demand certificates of perfect health from their future sons-in-law, but I hope the time will come when men will make sure that they are sexually healthy and that their future wives run no risk of becoming either infected, or what is almost as bad, sexual neurasthenics.*

Irene's parents have still no suspicion of the cause of her deplorable condition, and feel guilty that their daughter should have given poor Mr. West so much trouble and caused him so much expense. I was in today to see Irene and her mother chided her gently and lovingly for being "*such a burden*" to Mr. West. "*And such a healthy girl as she was!* You remember, Doctor. From her seventh year to the day of her marriage she had not a day's sickness. Married life agrees with some people, with others it does not." Irene merely smiled. A sad, cheerless smile. With her craving for morphine she struggles valiantly, and I trust that now, when she does not need it to quiet her pain, she will overcome the habit entirely.

*Doctors should not be too sentimental, but it hurts to see a healthy, cheerful girl converted into a ruin, into an unhappy person—neither man nor woman—thru ignorance.*

## A LOST LEADER\*

**S**ELDOM, if ever, does a man make a big name for himself during his first year at Oxford. And yet Brentwood proved a notable exception. He went up to Oxford with the biggest reputation of any of his year, and won a double blue by the end of his third term.

Brentwood was one of the finest, cleanest and straightest young fellows you could wish to meet; the type, at its very best, which is directing and fulfilling the destinies of the Empire all over the world. A man built for a great career. He was adored by children and dumb animals—and there is no finer praise.

The landlord of his rooms—in those days they were off the Cornmarket—had a daughter of twenty-two. This young woman had already set the gossips talking—and not without cause. Naturally enough Brentwood attracted her very strongly; but there it had ended, for Brentwood was a healthy young fellow with too many other things to think about; and Nellie was not a particularly pretty girl.

At the end of the second year came his 21st birthday; and it was duly celebrated in the fashion dear to Oxford. I should not say that Brentwood was actually drunk when the party finally broke up, but at any rate he was merry and muddled—and it was Nellie who helped him to find his bedroom.

In a little less than a month, he noticed the appearance of what he took to be a small boil. It caused some little discomfort, but thinking it merely an indication that he was run down, a little out of sorts, or that his blood was in poor condition, he paid no attention to the sore save by consulting a local druggist, and applying a boric acid lotion. It disappeared in due course.

Those were the darkest days of the South African War, the winter when disaster after disaster struck chill to the hearts of the people, but only nerved the country's manhood to finer effort. Brentwood volunteered, and sailed with the first troop to leave England. Towards the end of the voyage he began to feel decidedly ill, with sick headaches and intermittent feverish attacks,

---

\*By A. Corbett-Smith.



but he struggled somehow through the week of landing, parades and movement up country.

The night before A Troop went into their first action, Brentwood felt fit only for hospital. A week of drenching rain and no rest. The next day his troop was engaged in a prolonged skirmish in which Brentwood was badly wounded in the shoulder. They got him back to the hospital tent, and then it was discovered that he had developed an extensive red rash all over back and chest.

The surgeon was a young man of little experience, and he completely failed to diagnose the real nature of the symptoms. Also hospital accommodation and staff were inadequate, and Brentwood had to get along with little attention. He got steadily worse, his skin was now in a very bad condition, and so he was invalided to Cape Town. There they found that he was well advanced in the secondary period of a bad attack of syphilis. But the mischief was done, never to be repaired. That fortnight of unceasing hard work in bad weather with the grip of fever upon him, the wounded shoulder, the subsequent neglect, had all served fully to undermine a constitution already weakened by the insidious poison within his system.

He stayed on in South Africa for a year under treatment and was then pronounced sufficiently recovered to return to England. But it was a Brentwood whom none of us recognized. Stanmore, Tipley and I met him; and when he insisted that he really was the dear fellow whom we had seen off from Oxford in the dark of a December morning eighteen months before, none of us could face him for the tears in our eyes.

And all because of one little incident of which he had been at the time almost ignorant, almost the victim.

But the saddest was yet to come. Inevitably prevented from entering the Diplomatic Service, upon which he had set his heart, too weakened in health for continuous concentration in any serious work, Brentwood at last decided to join a friend who controlled a large tea-planting estate in Ceylon.

He sailed, leaving his heart behind in the keeping of a charming girl whom he worshipped. But he never told his love, like the man of grit he was. And she—she too loved him, and wondered. She knows now; and the shrine of his memory is very sacred to her.

For a few months I heard good accounts of him. But, almost unwittingly, the poison was still at work and the end was near, though none of us realized how near. I had been preparing to leave for the Far East upon business, when a cablegram arrived from Brentwood begging me to start by the first steamer. I got to Ceylon just in time to hold him in my arms as he died. A paralysis of certain internal organs had gradually developed, and the agony during that last fortnight had been intense. Almost his last words were, "They say the woman always pays; but, by God, I think I've worked off some of the debt!"

So died one of the finest men and one of the noblest characters I have known. His country was immeasurably the poorer for his loss. *He died one more victim to ignorance.* His father, who might have warned him of the new element, woman, which would enter his life on leaving school, had failed to do so. No one had warned him of possible results, and these things are not learned by instinct. The actual incident with the girl (an *amateur* prostitute, be it noted) might possibly have happened in any case, if not with Nellie then with another; but at least Brentwood would have been fore-armed, and the disease would have been arrested in its development.

## ONE OF LIFE'S LITTLE DRAMAS\*

THE facts can be stated briefly. She married at twenty. She was very happy. He was supremely happy. At twenty-one she had a boy, a big bouncing boy. Labor was tedious, extremely difficult, but all ended well. Their life acquired a new interest and they felt happier still.

A year later, almost to a day, she had another boy. Two years later another child came—this time a girl. They were very glad: they wanted a girl. She didn't get over this confinement as well as she did the first two. She was not exactly sick, but she lost some of her spirit and buoyancy. Attending to three children was not quite so easy as to attend to one. And then the cost of living had increased considerably during the four years of their married life, while the husband's salary had not.

They thought that three children would be enough for several years to come. She went to her family physician, who had attended her in three confinements and asked him if he could not give her something she should not get in the "family way" so soon. No, he could not give her anything. He did not believe in going against nature, etc., etc. The truth of the matter is, the good doctor was ignorant, and could not have given the poor woman anything if he had wanted to.

And so in about eighteen months another child came. It must be sadly recorded that there was no joy in either the maternal or the paternal breast, when the new arrival made its appearance. Rather there was sorrow and grief for a month or two. But finally they became reconciled to the situation. "We don't want them to come, but when they are here, we must do for them the best we can, and we wouldn't want to lose them for the world." They now began to use preventive measures, a knowledge of which the wife acquired from an obliging friend. The measures were neither quite effective nor quite harmless; they affected the health of both husband and wife, and finally she was "caught" again. In less than three years after the fourth child, the fifth one came upon the scene. It was a weak, puny

---

\* Dr. Wm. J. Robinson in *Never-Told Tales*, The Critic and Guide Co., New York City. (See Adv., last page.)



child, probably because the mother felt weak and exhausted during almost the entire pregnancy, while her mind was restless and her spirit rebellious. Also for the first time she had a severe postpartum hemorrhage. It was, however, controlled after packing the uterus with iodoform gauze, under an anesthetic.

After a rather prolonged convalescence, Mrs. B. got up and this is what she told her husband: "John, if I have another child before the end of ten years, I will kill myself." And she said it as if she meant it. And John thought that she had good reasons not to want any more children for some time to come. Only twenty-eight years old and five children—that is enough. So thought John and he determined to keep himself well in hand. Their preventive measures had proven ineffective, and so the only positive remedy was—to abstain. And he did. And before a year passed, John's dearly beloved wife was once more pregnant. It was outrageous that it should have happened—but it happened. It always happens. The mischief was done.

She went to her doctor—the same old family physician who had brought all her children and herself into the world. As she was only "a couple of weeks over," she thought he could do something for her, give her a little medicine or do something else. He told her to try a hot foot bath and with this cold piece of comfort he dismissed her. She left, sick at heart, but determined.

And now every fake and fraud advertised in the newspapers, every female regulator, every kind of pennyroyal pill, found its way into the home of Mrs. B. The only result for Mrs. B. was an irritated and inflamed stomach, so that she could hardly retain any food at all, and she lost about twenty pounds in weight. John looked on with deep grief; he tried to protest mildly against her using all the poisonous stuff, but his remonstrances only irritated her. As John told me, she did not seem to love him any more; in fact, his presence seemed to annoy her. Those who know something about sexual psychology will have no difficulty in understanding Mrs. B.'s feelings. It often happens in such cases that the deepest love is turned into the deepest aversion. It is as a rule only temporary, but it is real while it lasts. And the swallowing of pills, capsules, oils and tinctures went on.

One day she asked John for fifty dollars and left the house. She came back towards evening. She said nothing. She suffered

badly that night. Next day she began to bleed, and it kept up for two, three days. Then it stopped. Then she got feverish, developed pain in the abdomen, which became progressively worse. A physician was called in, and the poor woman was found to suffer from septic peritonitis. The uterus was emptied, a slight improvement set in, but she began to lose ground rapidly, and in ten days—Mrs. B. was buried. Who the man or the woman was who performed or rather attempted to perform the abortion will never be known, for Mrs. B., when asked by the attending physician to give the name of the guilty bungler, gave him such a look of scorn and contempt, that he did not attempt to question her any further.

*And so the five children were made motherless, to grow up without a mother's love, without a mother's care. And a man is walking about ashy-colored, sunken-eyed, distraught, half-dead. Does he consider himself partly or wholly responsible for his beloved wife's death? Who knows? But a happy home has been forever destroyed. Destroyed by the ignorance of the family physician, who did not know how or did not care to help the poor wife, destroyed by the ignorance, which makes it a crime to sell or to give away any conception preventives, destroyed by the ignorance and prudery which make the discussion of the regulation of reproduction problem a shocking subject even in medical journals.*

And when you think that the little drama, this heartrending tragedy, has its counterpart in every city in the United States, when you think that almost daily, yes, daily, young mothers are carried to untimely graves—the death certificate does not always state the true cause of death—and children are orphaned and husbands widowed, and misery is spread broadcast, and all thru ignorance, dark, cruel ignorance, you cannot help feeling impatient and rebellious, and you cannot help feeling that this world was all bungled in the making, and that you could have made a better, a far better and happier world if you had been the author of the job.

*Ignorance is the root of all evil. Broadly speaking, all human misery, all human suffering, is due to ignorance. And nobody in particular is to blame. The ignorant ones are not to blame—we can only pity them—for they either can't help or don't know how to help their ignorance. Often they do not even know that*

they are ignorant. And even those who make it a point deliberately to keep the people in ignorance, who make it a crime to acquire knowledge on a certain subject, are not always to blame, for very often they are convinced that what they are doing is for the benefit of mankind, that the knowledge they forbid would only prove injurious to the people. And can you blame men who are sincerely convinced that their work—no matter how pernicious from our standpoint—is for the benefit of mankind? No. We can only educate them.

Education is our only weapon. And it is of no use getting impatient. Each one has to do his duty according to his light and things will work out all right in the end. I know that the end sometimes seems far—far away in infinity—but if you know of any better and quicker way, than educational propaganda, to reach the desired end, I wish you would impart me your knowledge.

I should be truly grateful.



## WHO WOULD BLAME HER—WOULD YOU?\*

WHEN I learned that Brannigan got married I was dumb-founded. "The Hound!" I could not help exclaiming.

Only six months previously he had applied to me for treatment. He had a fresh and florid case of syphilis, which I knew would require long and careful management, before the virus would be more or less eliminated from the system and make him a safe individual to mingle with his fellowmen. He had blotches and pimples on his face, forehead and body, his hair was coming out, he had a nasty sore throat and white patches on his lips, tongue and inside his cheeks.

He followed treatment faithfully—which for a person of his class rather surprised me. For Brannigan was a saloonkeeper and quite a politician (or perhaps ward-heeler would be more correct), and for these people to give up smoking and drinking is quite a sacrifice, a sacrifice which they are seldom willing to bring, even if they promise you that they will. But Brannigan apparently followed instructions carefully and after three months' treatment his external condition was excellent. The eruption had entirely disappeared, and leaving the whiskey alone took away the puffiness from his usually bloated countenance, hence he looked even better than before he became sick. So that to the layman he looked a picture of health. He was telling me that his friends remarked on his exceptionally good appearance, and asked me if I thought he still needed treatment. Did he still need treatment? I explained to him that not three months, but three years at least is what he needed. But I saw he was skeptical.

The trouble with the common, coarse people is, that as soon as they get rid of pain, or of external disfigurements, they think that treatment is superfluous. They thus allow the disease to gain further headway, and when pain and eruptions again make their appearance, they reapply to the physician. Often it is too late to do anything in the way of curing the disease; all that can be

---

\* Dr. Wm. J. Robinson in *Never-Told Tales*, The Critic and Guide Co., New York City. (See Adv., last page.)

done is to relieve the symptoms. I explained to him these points, but, as I said, I saw he was skeptical.

And then he startled me out of my chair by the announcement that he intended to get married soon. *I explained to him, using all the eloquence and persuasive power at my command, that he was not in a position to get married, that he had no moral right to do so, that he would infect his wife, that she would have miscarriages, that if she gave birth to a living child, it would be puny, weakly and would probably die at an early age, etc., etc.* It was of no use. His moral code was apparently—a blank. He said that the day of his wedding was set, that he couldn't well put it off, and that he didn't think anything would happen. If anything should, he would then request my services. *I told him that a man who, being in his condition, would marry an innocent woman, deserved solitary confinement in the penitentiary for life; hanging or shooting was too good for him.* I then dismissed him, and that was the last I saw of him for a while. And when I heard that soon after he married Jessie Costello, who was barely out of her teens, my heart ached. Of course there can be no question of *love* in such a case. Brutal animal passion—perhaps. But whether he was attracted to her by her young pretty face, or by the considerable dowry left her by her father (he had been dead some two years, and she lived with her mother and a younger sister) is hard to say. Probably by both.

My heart ached, tho I knew the Costellos but slightly; but I was utterly helpless in the matter. I met Brannigan some two months after his marriage. He looked well and he told me, with a rather impudent smile, that he felt as fine as a fiddle, that his wife felt fine, and that he didn't think he would ever need me.

I had moved to another part of the city and I didn't hear of the Brannigans for about five years. Then one morning Mrs. Brannigan appeared at my office.

We physicians are used to see changes in women, who we knew as girls. This is particularly true of the poorer classes. Overwork, frequent childbearing, nursing, sleepless nights, disagreement with the husband, etc., etc., often work havoc with the faces of young women. But the changes in Mrs. Brannigan, née Costello, were so extraordinary, that my heart stood still for the moment. She had been plump, she was now as thin as a skeleton. She had had a wealth of black, glossy hair, now her

hair was thin, "moth-eaten," lustreless. One of her eyes was half-closed, and the sight in it was almost entirely gone, but what made her almost unrecognizable and repulsive, was the nose. The bridge of her once Roman nose was deeply sunken, so that the tip looked upward, and the flattened organ emitting a sickening disagreeable odor. She noticed that I was struck by the change in her appearance, and she smiled very sadly.

I took her history and I copy it briefly from my case book: She began to ail about three months after her marriage. She had a bad sore throat, very severe headache, fever, pains in the muscles, her hair came out, her face and cheeks got blotchy, etc. (Of course I needed no more symptoms to know what was the matter with her.) She wanted to see a doctor, but her husband didn't think it was necessary. He said he knew something good himself. He bought her some pills, which did her very much good. The pain went away, the face cleared up, etc. About two months later she had a miscarriage. In two months another eruption; pimples, pustules and blotches all over the body, and in four months another miscarriage. She had in all five miscarriages; finally about nine months ago she gave birth to a living child, but it was very weak, had an eruption on the body, and its nose was flat and fallen in.

Whenever she would get an eruption her husband would bring her some pills and some medicine (undoubtedly from the prescriptions which I had given him) and she would improve. After about two years of this home treatment she insisted on seeing a physician, and her husband brought her one. The doctor examined her, said she had eczema and prescribed. The medicine improved her condition considerably, but temporarily. *Of course the doctor knew what the disease was, but he was instructed by the husband, as doctors so often are in such cases, not to tell the truth.*

And so she had been going on for five years. Excepting the first three months of her married life, she never had a day of health or of peace. She was constantly suffering. The treatment was intermittent and only served to relieve the severest symptoms. Now the medicine was not having much effect.\*

---

\* I can fully corroborate the statement of Fournier and other great syphilologists that in women contracting syphilis from their husbands, the disease often pursues a most malignant course. And for the mere reason, that the cowardly beasts, *i.e.*, the husbands, are afraid to tell their wives what the matter is and so the disease is allowed to progress until such a time when treatment is well-nigh useless.



During the last year she hardly left her room: she was so much ashamed of her appearance. Hundreds of times, she said, she wished herself dead, and I gathered from her remarks that but for her strong religious faith, she being a devout Roman Catholic, she would have done away with herself long ago. Her husband also had occasional eruptions, but not so bad. He was now an alderman, and expected soon to be nominated for assemblyman. I understood that he was not treating her well. He was running around with other women, and with one he was keeping company "pretty steady."

What brought her now to my office? *Up to the day previous she had no idea that she had any kind of a "bad" disease, or a "catching" sickness.* Yesterday a cousin of hers, who was a medical student in Boston, came to see her; he was shocked by her appearance, and inadvertently remarked that she must be suffering from a very bad disease, which required very energetic and very thoro treatment. At any rate he was sure she was not suffering from eczema. The doctor who made the diagnosis must have been very ignorant or must have deceived her deliberately. He had heard of me and advised her to consult me. He knew I would tell her the exact truth. As she knew I had treated her husband once, she went to see me the very next day. I told her what her disease was and also told her that only the most energetic treatment could save her from its further ravages. I was afraid her nose was hopelessly doomed, but of course did not tell her so. She asked me how people got this disease. I told her the usual way, but added that people sometimes got infected from drinking cups, from using a towel which a syphilitic had used, from being shaved by a barber who had the disease on his hands, etc.

"And did my husband have the disease before he married me?" she asked in high tension. I told her as gently as I could, that I regretted very much not to be able to give her any information regarding her husband's condition. We were not supposed to speak of our patients to *anybody*. I would give all the information she desired regarding herself, but she must not ask me any questions regarding her husband. But I fear she understood. And this I could not help. Was I called upon to tell a deliberate untruth for the sake of whitewashing her husband?

*Certainly not.* Neither morally nor legally did I have any such obligation.

She wanted to put herself into my full charge, but unfortunately—or fortunately—I could not take the case, as we were leaving in a few days for Europe, for a nine months' trip.

I gave her, however, the names of two specialists and told her that either one would treat her intelligently and conscientiously, and would do as much for her as I could.

Some two or three months after I returned home, I learned that what I had feared had happened: Poor Mrs. Brannigan's nose was *completely* gone. The disease had made too deep inroads and there was no possibility of saving it. She was wearing an artificial nose, and but very, very seldom left the house, and when she did she was heavily veiled. Some months later I heard that her baby, the only one she had, *died*. It had always been puny and sickly, and when it got broncho-pneumonia, it had no chance at all. *When a child is born with a strong hereditary taint, is not treated properly, and gets one of the children's diseases—measles, bronchitis, pneumonia or whooping cough, etc.,—the death certificate may, in ninety per cent. of the cases, be written out beforehand.* Mrs. Brannigan did not attend the child's funeral. She was too weak to go out. But Mr. Brannigan did and he came home in a hilarious condition, half drunk.

And the following morning the neighborhood was shocked by the news that Mrs. Brannigan had shot her husband dead, while he was asleep, and then killed herself. The servants testified at the inquest that after the first shot they heard some conversation. Mr. Brannigan seems to have asked why she did it, and she apparently explained to him. But the answer must have been a short one, for the second shot which killed Mrs. Brannigan, followed very soon after. The papers had it, that Mrs. Brannigan's act was done in a temporary fit of insanity, caused by the loss of her child and by an incurable disease with which she was afflicted. But it was not a fit of insanity. The act was carefully premeditated, and was committed by her as a duty, as a punishment of a dastardly crime. In her letter, which the newspapers did *not* get possession of and which here appears for the first time, she explains and attempts to justify her action. Here it is:

“. . . May the Lord forgive me! I know I am about to

commit a mortal sin, but maybe it is a bigger sin to let such a man as Dan live. I have nothing to live for. My baby, the only creature which needed me, is dead. The doctor says my case is hopeless. He took me young and healthy and see what he made of me. If he killed me outright the crime would not have been so great as what he [has] done to me. I never knew a good day since I married him. A man has no right to treat a woman like that. I feel I ain't going to live long. And I know when I am gone he is going to marry Mrs. ——. And he will make her sick and miserable, and she will have sick children that don't deserve to live. No, that is too much. Let him suffer for his sins, for hiding from me what kind of sickness I had so I could be treated by a good doctor. . . . May the Lord help me."

Here followed some more lines which were not quite legible.

And so Brannigan expiated his sin, by being shot, a punishment which I had told him was too good for him. Mrs. Brannigan, crazed by the outrages committed upon her person by a conscienceless wretch, took the moral law into her own hands.

*I cannot find it in my heart to blame her—can you?*



## THE CASE OF MARY BROWN\*

MARY BROWN was a woman of "the plain people" class. She had worked in a large tailoring shop before her marriage, and since her marriage to John Brown she had given all her time to her home, and latterly to the two children which had come to her with an inadequately short interval between their respective births.

She was happy, in the sense that she had very little to cause her unhappiness. Her husband earned fairly good wages, and their living expenses were kept within limits, for neither was extravagant. It is true that they had very little, if anything, left at the end of the month, particularly after the babies came; but on the other hand they had never been accustomed to having more than a few dollars laid by for a rainy day, so that the lack of a surplus did not cause much unusual worry on the part of John and Mary.

Then there came two disturbing new factors into Mary's life. First of these was the unmistakable fact that in the due course of time a third baby would be added to the little brood, and the second of the possibility of the United States as a probable factor in the Great War.

Mary knew but little of wars in general, and of this Great War in particular. She had heard much talk about the coming of the war to our country on the part of her neighbors, but she was a woman who concerned herself but little with things outside of her little circle of personal and family interests, and so she was not unduly disturbed at first by the talk concerning the probable entry of the United States into the great conflict. She thought that it was a great sorrow, but no doubt an unavoidable one, and that those who had these matters in charge doubtless knew what was for the best—and, anyway, she "did not bother her head about such things," but left them for "the men folks" to settle.

But Mary's peace of mind was soon rudely disturbed by the excited and hysterical clamor of some of the women in the

---

\*Dr. Robert B. Armitage in *Never-Told Stories*, Advanced Thought Publishing Co., Chicago.

neighborhood when war had actually been declared, and the day of registration been appointed. For John was in the age limit of the draft, and was making arrangements to register. He told her that there was no probability of him ever being called into active service, and that he would almost certainly be exempt by reason of his dependent family. But Mary felt that he was just saying this in order to cheer her up, and she felt more certain of this than ever when she listened to the talk of her women neighbors.

Many of the neighborhood women were of foreign extraction, and they repeated tales told them by their mothers about men being dragged away from their homes and families, and driven into the ranks—all this over in Continental Europe, of course, but almost certain to be duplicated here, they said. And some of the women added that their husbands knew other men who were the relatives or friends of some in authority, and these persons in authority had passed the word that every man within the age limit was to be called to the colors at once, regardless of his dependent family; and that the wives were to be left to attend to the family needs as best they might.

Mary brooded over these things, and fresh fuel was added to the fire of her fears from day to day by the gossip and dismal prophecies of the neighbor women. She said but little to John about this, for he always laughed at her worries when she mentioned the matter to him; but she felt certain that he was only trying to save her from worrying and fretting, and that he was really as much disturbed as herself at the prospect. Her women friends told her that the men were maintaining a conspiracy of silence regarding the matter, in order to prevent worry and grief on the part of their women folk.

Mary felt that, somehow, she might be able to get along without starvation during John's absence in the army, with her two small children, were it not for the fact of the expected newcomer. The more she thought about the forthcoming addition to the family, the more worried and frightened she became. She became morbid on the subject, and her natural fears took on a deeper and more intense phase by reason of her physical condition, which predisposed her to flights of fancy and imagination. She began to grow desperate.

About this time, she grew better acquainted with a young

wife in the neighborhood who was of a different type. This woman had acquired a superficial knowledge of many things of which Mary had scarcely heard before that time. She told Mary that no woman need bear children if she did not wish to do so. She told her that it was a very simple matter for a woman to have a physician attend to these matters for her, and that no one was any the wiser on account of the matter—not even the woman's husband. She told Mary that she knew of some women who had visited the doctor on this errand as many as a dozen different times, and were none the worse for it; and that she, herself, had "had it done" twice, and had experienced no evil effects.

At first the suggestion repelled and horrified Mary, for she had been brought up in the old-fashioned school of thought to which such things as these were anathema; and she shuddered at the mere idea. But her new friend laughed at her fears, and called her "old-fashioned," and "behind the times." Later she met other acquaintances of the temptress, all of whom talked freely of visits to the doctor for the purpose named, just as they might have discussed the taking of a dose of cough medicine. It was the old story, and Mary found that the monster of frightful mien, which though at first hated, gradually lost its horrible visage by reason of familiarity, and later became endurable, and finally was embraced as a friendly thing.

One day, leaving her two children in the care of a neighbor, she went with her evil advisor to visit "the doctor" who would relieve her of her worries and terrors. She had arranged through her friend to pay him a certain sum in advance—all the money that she could lay her hands on at the time—the balance to be paid in monthly instalments. Entering the office of the human hyena, Mary was seized with a violent fit of trembling, and her first impulse was to open the door and regain the security of her home. But the scoundrel, sizing-up the situation, began to quiet her fears by laughingly telling her that it was not as dangerous as having a child's loose tooth extracted, and that in a day or so she would have entirely forgotten the whole matter. So Mary began to think that she had been making a mountain of a molehill, and apologized for her fears and misgivings, and bade the doctor to proceed with his "treatment," for such he called it.



The operation performed, Mary returned to her home with her friend, the latter laughingly telling her that everything would now be all right with her, and that before the week was over she would have entirely forgotten the whole matter, as the doctor had assured her. But Mary did not feel right about the matter. Not only was her conscience troubled, by reason of her former religious training, but she felt much disturbed physically. She experienced strange and terrifying sensations throughout her body, and it seemed to her as if something had been thrown into the delicate mechanism of her physical structure, which was affecting the normal movements and functions of the several parts thereof.

Reaching home, and dismissing her friend, she threw herself across her bed and wept, and sobbed, and moaned. She did not experience much pain at that time, but was conscious of something radically wrong in her physical make-up. She then went out after her two children and brought them home. She threw her arms around them, and sobbed out her sorrow, much to the dismay and distress of the little ones. She had a strange presentiment that she was soon to leave these two little ones behind her, and her heart was chilled at the thought—not that she feared what might befall herself, but that she was filled with dread of leaving behind her the two tiny mites into whom the best of her life had flowed.

In a day or so Mary became violently ill. Her husband becoming alarmed, called in a reputable physician who saw in a few moments just what was the cause of the trouble, although Mary at first denied everything (in accordance with the hastily whispered advice of her woman friend who told her that if she told the truth she would be arrested and sent to prison). The physician ordered her removal to the hospital, and saw to it that she received the best possible treatment and attention. But before long the most alarming conditions manifested themselves; blood-poisoning set in; and Mary began to slip away from the hands of those striving to bring her safely through the ordeal. Before she died she made a full statement, naming the woman neighbor and the abortionist, and stating just what had happened.

The legal machinery was set into operation, but the abortionist and his accessory made desperate efforts to escape the net spread for them. A celebrated shrewd and unscrupulous lawyer

who made a specialty of a certain class of criminal cases was employed by the abortionist, who seemed to have money at his disposal (some said that there really existed a "protective association" composed of these malpractitioners, and a "defense fund" provided for just such cases).

The prosecution introduced evidence showing the woman's condition, both the attending physician and the hospital authorities proving conclusively that the woman had died of blood-poisoning resulting from the effect of an operation performed with the purpose of bringing on an abortion. Mary's signed deathbed statement was introduced as evidence, and seemed destined to effect a conviction.

But the shrewd lawyer for the defense placed the abortionist on the stand, and he flatly denied not only the fact of his performance of the operation, but even the advice regarding the same. He testified that Mary had visited him in company with her woman friend, for the purpose of having an examination made regarding her physical condition. He swore that the examination was made, and that he had advised Mary that she was pregnant, and that there was nothing to prevent her from having a natural and normal "carrying time," with a safe delivery at the end thereof. He testified that Mary seemed quite disappointed, as she had evidently hoped that she had been mistaken in supposing herself pregnant. He denied that the subject of an operation for the purpose of producing a miscarriage had been brought up in the entire conversation. He denied that a considerable sum of money had been paid to him, but stated that only a modest fee for the examination and advice had been accepted. He indicated his belief that after leaving his office, Mary had proceeded to some woman abortionist (of which there were many, he said) and had an illegal operation performed upon herself, as she evidently did not wish to become a mother again.

Mary's woman friend was then called to the stand by the defense; and she corroborated everything that had been testified to by the abortionist. Like a parrot, she repeated his very words. She had been carefully drilled in the office of the abortionist's lawyer, and had rehearsed the whole story until she could repeat it glibly. She had been induced to perjure herself by threats of losing her good name, and by possibly placing herself in the

position of an accessory; and had been warned against paying any attention to the district attorney's promise of immunity for her if she turned state's evidence, this being a common trap she was informed. Besides this, there was held before her the promise of a yellow-backed bill of respectable denomination if she "acted right"—and she did!

The defense sought to explain Mary's deathbed statement as the result of the suggestions made to her by the attending physicians and hospital attendants while she was in a state of feverishness nearly approaching delirium. In fact, in his clever address to the jury the lawyer managed to introduce a veiled suggestion that the reputable attending physician himself might know more about the matter than he wished to have appear, and that he was trying to throw suspicion on the poor abused client of the lawyer, of whose success he probably was jealous, etc., etc.

The jury disagreed—it was ten to two in favor of conviction, however. There will be a new trial eventually, no doubt—though the same has been postponed several times. In the meantime the memory of the case is fading away, and the matter is becoming stale and cold, for there are many other cases coming forward for attention every day, and the old ones are almost overlooked, particularly in the case of oft deferred and postponed "new trials."

John has married again—he really did not wish to do so very much, but then "he had to have someone to look after the children." He has moved the little family away into another neighborhood where the old case will not be talked about. The new mother is a good woman, and tries her best to "do the right thing by the children." And she takes the little ones with their father, every once in a while (the intervals between such times growing longer, however, as time passes) to visit the grave in the far distant cemetery.

There are one or two, however, who were present at the scene in the hospital, and in whose ears occasionally still sound the wailing cry of the woman fast sinking into the depths: "*If I only had known; if I only had known!*"



## A LETTER TO A GOD-SON\*

**M**Y DEAR HUGH: It is 18 years since that morning when I stood beside your Mother, as she held you in her arms, and took for you the vows which our Faith enjoins. That afternoon I wrote to you my first letter. A little of it I can remember: "Tell your Father," I said, "to teach you how to play with a straight bat and to stand up to the fastest bowling; how to ride clean across country and not to funk the fences; how to bring down a pheasant coming fast over the tree-tops in a high wind. And tell your Mother to teach you, for her sake, to be gentle and courteous in reverence to all women."

These seemed to me a summing up of the qualities which go to the making of the best of all products, a Gentleman. It was not for the sake of the sport, but for what the Open Life made you. And given these qualities you are ready to face anything, in Church, State or Business.

Now you are shortly leaving the best of schools for the great world outside and your tussle with life. And you are going to encounter—not, perhaps, just yet, but in a year or two—one of the biggest factors in life, the other sex. How are you going to tackle it?

Of course, just for the moment, you won't understand. You cannot imagine what you will have to do with women or they with you, at least, to make a serious business of it. I know when I was at school we used to think girls a rare nuisance and we never used to talk about them. I don't suppose things have very much changed, have they? But there was Miss Dorothy, whom you met last holidays down in Virginia, an "awfully decent sort," as you told me. I know she is, and if they were all jolly, healthy, out-of-door girls like that I should have nothing more to say, and I certainly shouldn't be writing this letter. But I am afraid that Mistress Dorothy is rather an exception.

Now I am not going to preach to you about what you ought to do and what you ought not; I have never done that, have I? I just want to tell you a few facts about a rather unpleasant subject and leave the rest to your good sense. Don't imagine,

---

\*By A. Corbett-Smith in *The Problem of the Nations*.

either, that I am going to write you an essay upon that most delightful and elusive of topics, "Woman." For one thing you would only be terribly bored, and for another every man has to find these best things out for himself. "It's mean"—as a young lady once remarked to me—"to profit by other people's experiences; I want to profit by my own."

But there are some things which you will not find out for yourself, or if you do it will probably be in the wrong way and with possibly disastrous results. It is just those things that I want to tell you about if you will let me. And if you can't quite get the hang of it all right away just put this letter down and read it again in a year or so.

\* \* \*

How shall I begin? It is a little difficult, and yet not so difficult as it might be because we're starting fair, you and I. We talked over certain things when you first went away to school. Since then you have gradually come to understand what sex means and there is nothing more to tell you about the simple facts. Every young fellow, when he arrives at a certain age, experiences some more or less certain impulses for which he cannot properly account. There is nothing whatever to be ashamed of in them; they are perfectly natural, and girls experience them in much the same way.

But up to now there has been no opportunity, and probably no inclination on your part for directing those impulses towards the other sex. You liked Miss Dorothy because she was a good pal, played a most creditable game of golf, and made a jolly good inning for you when we played against Deepcut. But I'll swear that you never wanted to kiss her; and it would have spoiled everything if you had.

Well, now you are going to face life in reality. You'll find yourself with men who are beginning to look upon girls from a new point of view. You'll take a little time to adjust yourself. But I shall not be at all surprised to find, if you ask me to lunch in your new quarters, that you have become quite an ardent admirer (from a platonic standpoint, of course) of one or other of those extremely pretty young ladies who dress so daintily and sing so charmingly in "The Staircase Girl." No, you need not trouble to hide their photographs, because if you do I shall only ask to see them; and I am fairly certain to admire your taste.

After all, a pretty girl is one of the loveliest things God ever made, and if they are not to be admired and made a fuss of (within reason) I don't quite see why they were ever created.

\* \* \*

But coming back to this question of impulse, it seems to me that there are two ways in which a young fellow feels it. The one is a simple desire for the *companionship* of a being of the other sex, a feeling, an attraction which no one has ever properly defined and no one ever will. This we may call "sex-hunger," for want of a better term. The other is an impulse to gratify the sexual appetite by actual physical intercourse with a woman; either with some particular woman or with women as a sex.

Do you quite see what I mean, or shall I try and put it a little more clearly? Mind you, both these impulses are perfectly natural. If anyone tells you that the former is natural and proper, and that the latter is unnatural and wrong, then he has not grasped the rudiments of human nature. *The sexual impulse is the greatest of all natural laws. It is wrong only when it is used unworthily and to base ends.*

I am going to say very little about "sex-hunger" because, in one sense, there is very little to say. You are quite capable of looking after yourself. Some men feel the need of female companionship more than others. It rather depends on your general line of work and how fully you are occupied. In any case you are certain to find a big difference when your hard physical exercise is cut off, a big gap to be filled. You must keep up your baseball and football as long as you can after you leave school. If you are working hard and manage to get in a fair amount of exercise you will be happy enough. Go and visit, too, at a few good houses and meet nice people. Cultivate the acquaintance of a few charming women, pay little attentions, and so on, and you will probably find as much female companionship as you want.

\* \* \*

I must confess that I am a great believer in freedom and comradeship between men and women. Each sex reacts upon the other, each learns from the other, and this is all to the good. If a young fellow has been brought up with a love of the open air—and it is this love which makes you what you are—I can see no danger in his comradeship with a nice girl. Such a man,



too, is generally rather fastidious in his choice. He will never be really content in carrying on a flirtation with a golden-haired maiden in a photographer's shop, or with a waitress in his favorite café. It really isn't worth it.

Of course you will have your little love affairs, passing moments of delicious, stolen joys. You need not fear for my sympathy. When I was about your age I remember that my affections were fairly equally divided between a lady, who was perhaps ten or twelve years older than I, and a girl (very beautiful I then thought her) whom I met at the State Fair. The former relationship did me a world of good, and I am proud to think that even after all these years we are still dear friends. The latter affair came to an untimely end when the young lady prevailed upon me to visit her people.

But if you are working and living alone in Chicago and you don't get much exercise and you are rather cut off from pleasant female society, then I see danger ahead. And this brings me to the other kind of impulse.

\* \* \*

Sex-hunger and sexual impulse are each parts of the great law of Sex Attraction, but there is a certain difference between them although it is difficult to define. As I honestly believe, and I say this in all reverence, the Creator bestowed this sexual impulse upon man that it might serve two ends. The first is the reproduction of life, and the second is that it might form the supreme manifestation of love between man and woman. The world must recognize the first, it does not always recognize the second.

Different peoples have different standards of morality upon the relationship of the sexes. What is regarded as quite ordinary in some countries is looked upon as most immoral in this country. And certain habits and customs which we never think about because they are practically a part of our everyday life—these would be regarded as grossly immoral by, say, the Chinese. It comes to this, that in this question of morality you must abide by the customs of the society in which you live or take the consequences. In the same way you may saunter across one of the pleasant tracts of grass in Lincoln Park, but if you go to another city and indulge in a similar recreation in one of the parks there you will be fined for the privilege.

But a man is not apt to bother very much about the morality of the act when his sexual impulse drives. I may be accounted somewhat of a revolutionary, but I hold that to sin against Love and one's own conscience is graver far than to sin against the morals of society.

\* \* \*

And so I put the matter to you from this point of view first of all: You are given a very wonderful and beautiful thing. Are you going to abuse the gift and drag it through the mire, or carefully cherish it until you may place it to the noblest uses for which it was given? If the former, you will experience some brief moments of mad, sensual passion, with immediate and unfailing self-reproach and self-disgust; if the latter, you will realize all the ecstasy of the most perfect thing in life, the clean and passionate intimacy of union in all its freshness with the woman whom you come to love and make your wife.

Does this seem too ideal a programme? Well, youth is the age of ideals. It may be difficult to carry out but it is by no means impossible, and at least it is worth setting before yourself. You will come to understand better as the years pass. Now we will turn to hard facts.

\* \* \*

After you have knocked about the world for a little you will very naturally ask me why I would attempt to deny you an experience which most other young men indulge in. You will say that you probably will not be in a position to marry for at least another ten years. Am I going to condemn you to a celibate life all those years and stifle what I admit to be a natural impulse? That the experience will do you no harm; that you must learn what life means; these and other like arguments.

Yes, that question has been put by thousands of young fellows to men who are far better qualified than I am to reply to it, and I do not believe that a satisfactory answer can ever be given. I am young enough to remember vividly my own youth with all its desires and impulses, and yet old enough to have seen more of the world and of men and women than most can crowd into a life-time. And so I am not going to say "Thou shalt not," nor tell you that it is morally wrong or anything like that. But I am going to answer your argument in the approved Irish

fashion by setting another one before you for you to solve. In a word I am going to try to show you the other side of the picture and then leave the whole matter to your own practical common-sense.

\* \* \*

Someone will perhaps tell you, or you may come to think it for yourself, that continence (or abstention from sexual intercourse) is apt to be physically harmful to a man. *Such an idea is absolutely and entirely wrong.* I believe that Nature has made one or two mistakes, but she certainly has not made one in this.

The harm is supposed to arise from the overmuch accumulation of semen, the discharge of which at such times does indeed give relief. But, as you know, Nature has provided what we may call a safety-valve, and if this does not act normally at proper intervals, then I think that it is a matter for medical advice. The temporary discomfort is a very trifling affair beside that which every woman experiences each month. And I do beg you, old man, not to imagine that you ought to seek relief in, shall we say, an irregular way. I assure you, and I know that I am well backed by medical opinion, that there is absolutely no necessity. I admit that the sexual impulse is strongest at those times, but the remedy lies in your own hands. If you fight it down once or twice, throw yourself into some extra hard work, get a long day on the golf-links, or a good tramp across country, you will find that things come to adjust themselves quite easily. Above all, keep away from "The Staircase Girl" and such like performances, and don't read erotic books.

\* \* \*

Now we will imagine that one evening things are too strong to resist even with a fight. I can see you throw your books across the room unable to concentrate on anything. You feel that you simply *must* go and face the unknown. Or perhaps you have had a particularly good dinner at the College Inn and three or four of you are going to have a really jolly evening of it. You'll probably look in at the Empire, there will be more drinks, and before you know where you are you will find yourself talking trivial nonsense to a beautifully gowned young woman who naively suggests that you see her home. Why not? What does anything matter? You are feeling like the mouse who got tipsy over a puddle of whisky and then sat up and said, "Where's that damned cat that chased me yesterday?"



I am imagining your first serious attempt to realize this big thing of life. And as it is the first it is ten chances to one that you fall into the hands of an ordinary professional prostitute, and not one of the better class, either. Well, you are making a mistake to start with. What you really desire—and I see you as a clean-limbed, healthy young man—is the gratification of your appetite under the glamour of love. You want to feel that the woman, whoever it is, gives herself to you because she is attracted by you, by your pleasant talk, by your good looks. You will be disappointed. A prostitute is out solely to make money. It is with her as regular a trade as the selling of potatoes is to the grocer at the corner. She has to live, pay an exorbitant rent for her rooms, buy good clothes, and so she must needs make as much money as she can. She cannot afford to be generous.

It is to her interest to counterfeit love, to act a comedy for your particular edification. But you will not be deceived. In any case you will quickly be disillusioned when it comes to the sordid business of paying in hard cash for your few hours' amusement. And probably, seeing that you are a novice at the game, she will attempt to extort every penny she can. Do not blame her, it is her trade. Men made her what she is; she is absolutely right to repay her debt, with interest.

I am not going to paint for you all the mean and shabby details of your business deal. You will have experienced in a very tentative way the thing which you set out to experience and the net result will be, for the woman, five or ten dollars in her pocket; for you, the loss of so much good money which you can ill afford, no real physical satisfaction, but merely a feeling of deep disgust at yourself and a longing to kick yourself downstairs.

You do not believe me? Very well, try it; and if you prove me wrong I promise to pay for your evening's amusement, and any expenses which you may be put to as the consequences of it. Yes, "consequences"—for I have only suggested what your feelings will be as the immediate result of your experience. Now you shall hear what some of those consequences may be:

\* \* \*

There are certain diseases which a man is liable to acquire from sexual intercourse with a prostitute; we call them "venereal," or "sexual" diseases. And if I were disposed to back your

chances against infection in such a first experience as I have described I would not take odds at 100 to 1. The two special diseases are "Gonorrhea" and "Syphilis," and you may have contracted either. I will take each separately and tell you a little about them.

You will know within a week whether it is gonorrhea, in its more usual form. There will be a dull aching in the groins, and a yellowish, matter-like discharge from the inflamed urethra. You will naturally be a little alarmed, and in a few days more, as you go about your ordinary business and eat and drink as usual, you will find things beginning to look serious. Then you will probably mention it to an acquaintance, for you won't care to tell your father or me.

"Oh, that's all right," he will say—"it's quite simple. Everybody gets it and we'll cure it in no time." He will tell you go to Jimmy the druggist and ask for a certain drug and then follow the directions. If he has told you the right thing and you follow the instructions with scrupulous care, you *may* find that the symptoms disappear in a fortnight or so. Then you will stop the treatment and go on with your usual life. If the attack was a mild one you *may* have got safely through; but again I am not backing your chances. *It is the most curious and the most dangerous fact about sexual diseases that the symptoms—even serious ones—disappear under treatment in an incredibly short time.*

\* \* \*

Now we will suppose that the attack was not a mild one, or that you have not applied proper remedies, or that you have consulted a "quack" doctor advertising in one of the papers, or that you have not persisted long enough in your treatment. All very reasonable suppositions. The disease may then turn into something really serious and become chronic; that is, it will get a grip of your system and break out again long after you have imagined yourself fully cured—even years after. Perhaps you may not be able to get the discharge to dry up and disappear. From this infection will possibly be spread from soiled linen, towels and such like, and a perfectly innocent person may contract the disease.

And if the gonorrhea becomes chronic you will not necessarily find the original symptoms again attacking you, but a variety of complications may ensue. For instance, there may result a very painful inflammation of a certain small organ connected

with the testicles, or perhaps an attack of a form of rheumatism, or, very frequent and particularly serious, you may develop ophthalmia and so blindness.

Gonorrhea is very contagious—you see how easily you may have contracted it. A man who imagines himself fully cured may marry, and then he will infect his wife. The results with her are infinitely more serious. *To begin with, gonorrhea is known to be one of the most frequent and powerful causes which prevent a woman having children. The disease may also get a firm hold of certain internal organs and she will have to undergo serious operations, risking disablement and even life.*

\* \* \*

You must not think that I am selecting rare cases and telling you all the worst facts with the object of frightening you. I only want you to understand that gonorrhea is indeed a serious thing which, supposing you ever contract it, you must tackle the very moment you think you are infected, and persist in treatment under skilled medical advice until you are pronounced absolutely cured. I am not exaggerating things one little bit; in fact I am not telling you the worst.

I am not going to give you any bothering figures, but I can assure you that there is no disease in the world more prevalent than gonorrhea. I will just quote for you one statement by an eminent man who has made a special study of this disease, and from that you will see that you are up against a really tough proposition:—

*“It has been established beyond doubt nowadays that about 70 out of 100 of various serious diseases” (which he names) “met with in married women are due to the infection of their careless, ignorant or unscrupulous husbands.”*

\* \* \*

Two words more and then I have done with gonorrhea. Supposing that you ever do contract it you must not necessarily blame the woman. A woman is not attacked by the disease in the same way as a man, and, indeed, it is very rare for her to know that there is anything the matter with her. Even medical men often fail to diagnose the symptoms.

And the other word is this, although I hardly think it necessary to say it to you. Whatever any friend of yours may remark,



to have contracted gonorrhea is *not* a sign of manhood and so something to be proud of. You are a gentleman, old fellow, and no gentleman thinks of women like that!

\* \* \*

Now I am going to tell you something about "Syphilis," the other disease which you may have contracted from that one trivial adventure with a woman. And as syphilis is really serious, unless you begin treatment right away and carefully persist in it for a long time, I shall have to say a good deal about it.

The first danger with syphilis is that you may pass over as unimportant the primary symptoms, or first indication that you are infected. You may have become poisoned by the microbe either in the sexual act or, if the woman happens to be infected on the lips or mouth, by kissing her. In any case the first symptom appears in about three weeks, a small, hard ulcer, which is called a "chancre." This forms either upon the genital organs or upon the mouth, or indeed upon any part of the body which came in contact with the infected place upon the woman. The chancre is often quite insignificant; you will take it to be a trivial boil, perhaps, and it will gradually disappear with or without any kind of treatment.

Very probably you will hear it said, "Gonorrhea is a very ordinary complaint, easily cured, but if you get syphilis you might just as well go and shoot yourself right away." Those very words were said to me by a young fellow only last month; he had got syphilis and was very seriously proposing to poison himself. Even educated men often think very much the same, and, what is far worse, say it.

Hugh, such an idea is not only absolutely wrong, it is criminal, and does immense harm! Of the two it is syphilis which is more easily treated. I will not say cured outright, because it is rather a lengthy business. But I give you my word that a case of syphilis can be made non-infective in 48 hours. If only a man will go straight to the very best medical man he can find directly he suspects that he is infected, and if only he will rigidly follow the advice and treatment given, then he need not be afraid. It will take time, it may take a couple of years before he is absolutely cured, but he will be non-infectious and the disease will have been stopped from attacking other parts of the body.

\* \* \*

But if you neglect this advice and discontinue treatment then look out! The next thing that happens is the breaking out of a particularly disfiguring rash. You see the poison has by now begun to spread through your body. The rash generally indicates what are called "secondary" symptoms, but very few cases are exactly alike. *This is the time when the disease is most contagious.* You remember how careful they were when you had scarlet fever; how they separated you from everyone and disinfected everything. Well, this period of syphilis is much the same. You may give it to anyone in all kinds of unlikely ways, by a towel, a cup, a pipe. A workman, for instance, may become infected through drinking out of the same mug of beer which an infected comrade has used. Then he, too, will go through the same course of the disease, beginning with the "chancre."

I don't want to horrify you too much, old fellow, but I do want you to realize what is likely to happen if you don't go straight off to that doctor and stick to the treatment. If you stop the treatment the thing will break out worse than ever somewhere else. In some parts of the world, particularly in some country districts of Russia, syphilis has become an absolute plague, attacking every single family, men, women and children. They never get treated properly because doctors are few, and so the disease steadily spreads and develops into other diseases which are almost too dreadful to talk about.

\* \* \*

And it is these other diseases, produced by syphilis, which give to syphilis the evil reputation it has acquired. It is, I think, quite safe for me to say that the "tertiary" symptoms, or evil results, only follow when there has been inadequate treatment in the earlier stages.

Well, then, if the treatment has not been of the proper kind, or if treatment has been stopped too soon, there is not a single organ in the body which may not be attacked. And *the* part which is most liable to attack is also, unfortunately, the most important of all—the brain, and the nervous system generally. A great French specialist made careful notes upon 4,700 cases of these "tertiary" symptoms and, out of all the various parts of the body affected, no fewer than 2,000 developed syphilis of the brain and spinal cord.

I could fill pages with details of these symptoms, but I will only most earnestly beg you to weigh very carefully every word that I have written, for I have not exaggerated one iota. *There is not a single organ in the human body which may not be attacked and destroyed by untreated or neglected syphilis. And to destroy some of these organs means certain death.*

\* \* \*

Last of all I must tell you of the gravest of all results of syphilis—its effect upon children, either by death before or soon after birth, or by the suffering to which they are condemned in life.

I don't want to say much about this side of it. You will understand why. It is the last but the strongest appeal of all to every man. Some day, Hugh, you will meet a girl whom you will love very dearly, who will become all the world to you. She, too, will have learned to love you and, because she is a woman, it will be her dearest pride to give into your keeping in full, overflowing measure all her pure soul and body.

This is, perhaps, too big a thing for you to understand yet awhile, so just for the sake of argument we will imagine that you have begun to realize that Miss Dorothy means a great deal more to you than "an awfully decent sort"; that in fact you have come to see that she is a very dear girl whom, the gods willing, you would really like to marry.

Now supposing that as a result of that little adventure of yours you were so unfortunate as to contract syphilis. You must not forget that this would have been a very ordinary result. You might, had I not now warned you, have neglected to get fully cured and so have married Miss Dorothy while in a state of infection, although believing yourself to be quite fit.

\* \* \*

In the first place you would convey the poison into her system, with all the possible results to her which I have told you of. Ah! Hugh, that is not pleasant to contemplate, is it? The one being in the world whom you would love and cherish above all others. Then there might be a child. You love children, Hugh, and they, too, love you. You should be very proud of that.

*A child born of syphilitic parents is almost fatally condemned to death, either before birth or during the first few days or weeks*



*after birth.* If it lives it grows up a being apart from other children. Perhaps, with the stamp of years of life and suffering upon its little face from the hour of birth, it may grow into a poor, wizened creature, developing all sorts of ailments, never free from suffering—need I go on, old man? Oh, you will think of this, won't you! For your wife's sake, for your children's sake, think. Is all this worth an hour's unsatisfied indulgence? If you *must* do it, and the evil thing befalls you, then I implore you, by all you hold or may hold sacred, to face the consequences like the man you are and not to rest until you have driven out the last trace of the poison from your body, and you are clean once more. Promise me, Hugh!

\* \* \*

There are two more points which you may possibly think to put to me. You may say that gonorrhea may be very common, but that surely syphilis is rare. Again I do not want to give you a lot of figures, but I will just take two cities on either side of the world and tell you how many cases of syphilis were actually under medical treatment at a certain time.

In Melbourne, out of a population of 600,000, and during 1910-1911, there were about 3,000 cases. In Petrograd, out of a population of 1,620,500 in 1911, there were recorded 45,023 cases of syphilis and 61,355 cases of other forms of sexual disease, including gonorrhea. That will show you how prevalent it is. If I were to tell you how many young men in New York or Chicago contract these diseases you probably would not believe me.

\* \* \*

And the other point might be this. You may argue with yourself somewhat in this fashion: "Yes, I see that there certainly is a big risk if I have anything to do with one of those women of the streets. But all those arguments do not apply in the case of a girl who is practically straight and earning her living in ordinary business. She will not have anything the matter with her."

I am afraid that I must dispel that illusion too. "*Practically straight,*" I think you said. It is just the girls who are "practically straight" who are the most dangerous, from the point of view of disease. I will tell you why:

The average professional prostitute knows well that her pros-

pects of trade depend very largely upon keeping herself free from infection. She may not know that she is in an infective state, but she is certain to take reasonable precautions. She is a woman of experience, she knows what to do, and she realizes the value of cleanliness. If she neglects this she is doomed.

The "practically straight" girl (shall we call her an "amateur" prostitute?) is not a woman of experience. *Under the conditions in which the average girl of today is brought up in this country she is fairly certain to be almost entirely ignorant of the most elementary facts of sex and the functions of her body.* She may not even have heard of the existence of sexual disease; and she certainly will have very little idea of putting into practice those regular habits of strict cleanliness which her professional sister rightly regards as a necessity.

From every country in the world comes the same report: "It is not the professional prostitute whom we fear, but the amateur. We can exercise some control and supervision over the former, we can have none whatever over the latter."

\* \* \*

You seek for the glamour of love over your sexual impulse and act. You think that you have found it in a girl who does not expect payment in cash for her favors. You are wrong. Once again you are putting your money on the wrong horse. If it is to the interest of a professional to counterfeit love, it is still more so with an amateur.

A girl takes her first false step through ignorance of the consequences, through curiosity to realize the big thing of life, and, most frequently of all, for love of the man. Once the act is accomplished the barrier, physical and mental, is broken down and she is an entirely different woman. You cannot realize what that barrier is to a girl—very few men can. Once it is down she is at the mercy of the world. Her maidenly reserve, innocence if you will, is torn from her. She has lost for ever a great possession. The man who has taken it is responsible in the sight of God and men for her future life.

Well, she has parted from her first lover. She may run straight afterwards, but it is improbable. The restraining influence has vanished. From her experience of the sexual impulse she becomes reckless and other lovers follow in succession. But

a woman knows only one real passionate love in her life, all the others are merely shadows. She may seek to regain that love in another man, she may have her passing dreams that she has found it once more—they are only dreams.

And so the comedy is played. She would have each new lover believe that she is chaste, or, if the mask falls for a moment, then "practically straight." She, too, would throw the glamor of love over the act. It is a mockery; she knows it, and you in your heart know it. Believe me, old man, it isn't worth it!

\* \* \*

You will find your amateur prostitute everywhere. In the chorus, behind the counter, hastening to fetch you your meal at that select little café. When you go abroad you will find her—but there, I could write for you pages of romantic disguises which discreetly veil the amateur. In fact, the professional has long since recognized the value of these disguises in her quest of trade, and it is now exceedingly difficult to trace the dividing line.

So you see that if you must be on your guard with the professional, you must none the less beware of the amateur. The former is absolutely certain to become infected sooner or later despite all her precautions; the latter generally contracts the disease at an early age, before she is 18 or 19. *Indeed, it is most sad to think that the majority of female patients now being treated in the hospitals for sexual disease are young girls below the age of 20.*

There, that is all that I am going to say about it. We, your Mother and Father and I, desire your happiness and good fortune more than anything else. We want you to turn out what we have tried to make you, a gentleman in the best sense of the word. We can only lay the foundation, the rest is in your hands.

I have told you these things only for your own health's sake and that you may at least be forearmed. I once had a dear friend who was killed by syphilis simply because he knew nothing about it. [See "A Lost Leader," page 634.]

\* \* \*

There are now many hundreds of men and women working hard to stamp out these diseases from civilization. *Syphilis and gonorrhea are, in themselves, no more immoral than small-pox or*



*scarlet fever. It is not a disgraceful thing to have contracted them, but a deep misfortune.*

And so we would, if we may, make the world a more beautiful place to live in. We would win to a finer and purer relationship between men and women, each living for and with the other. We would see our children grow into strong and sturdy citizens.

\* \* \*

Perhaps you are going up to the University in a year or so, and of course you want to make both the football and baseball teams. We should be proud of you. You won't make them if you go fooling around with women. Later, perhaps, you are going to study for the medical or legal professions. If you spend evenings in a girl's bedroom your brain will refuse to answer when you call upon it. You will find it impossible to perform a delicate operation, or to plead a case in Court. You will not be able to concentrate.

If you steadily fight that sexual impulse you will be incomparably the finer man for it, in brain and body. If ever you must give way, then for God's sake remember what I have told you: "Look to the end," as old Aristotle said.

Here is a little check to help you through the Summer Half.

Yours always affectionately,

A. CORBETT-SMITH.

## THE CASE OF ED AND BESS\*

I KNEW Bess when she was a high-school girl. Even then she gave promise of the woman of lofty ideals, high principles, and loyal affections into which she was destined to evolve.

I knew her when she afterward went away to college, and I noticed with pleasure the consistent unfoldment of her beautiful character as evidenced by her expression in conversation and in her actions, during her several visits to her home at vacation time and between school terms.

I knew her when she fell in love with Ed, then an assistant in the office of a leading firm of architects in the city in which all of us lived; and I approved of their engagement.

Like her family and her circle of friends, I thought the pair particularly well mated. It seemed to me that while Ed lacked some of the finer feelings and lofty ideals which were so strongly in evidence in Bess, he was possessed of sterling qualities and practical views which promised to furnish the necessary balance to Bess' possibly somewhat Utopian view of life. He gave every promise of becoming the "good provider" which modern society considers the first requisite in a prospective husband; and his character seemed to contain that element of loyalty and steadfastness which is most necessary in a husband. The future promised great things for Ed and Bess.

All of us who were interested in the doings of the two young folks noted with pleasure the constantly occurring evidences of Ed's progress in his profession. Several fortunate circumstances, added to several pieces of well performed work, served to advance his position with his employes, and, finally, the death of one of the seniors caused a general moving-up of those concerned in the firm's business, and Ed was admitted as a "real" partner, with a quite satisfactory drawing account, and every prospect of a nice profit-dividend at the end of each year. And we were delighted to receive the notices of the early wedding which closely followed upon the business advancement which had come to Ed.

We attended the wedding, and all agreed that no young

---

\*Dr. Robert B. Armitage in *Never-Told-Stories*, Advanced Thought Publishing Co. Chicago.

married couple ever looked happier, and that no newly wedded pair ever seemed to have so happy a future mapped out for them by Destiny. The look of proud, loyal devotion upon the face of the bridegroom was set off by the equally noticeable expression of gentle, happy affection displayed by the young bride. The Fates seemed to have been in a joyous mood on the day this wedding was arranged.

The early married life of the young couple, as we observed it from time to time, seemed to justify the high expectations entertained by their friends and respective families. They settled down in a cosy little apartment—a “regular little bird’s nest” the bride’s enthusiastic girl friends called it. Their little social entertainments were looked forward to with delight by their somewhat extended circle of friends—they were so simple and unpretentious, and at the same time so “perfectly enjoyable” and satisfying.

I was not their family physician, although being a close friend of the family—in fact my practice was almost entirely confined to my chosen specialty, and I had long ceased to be “the family doctor” of any of my old friends and neighbors. But in confidential conversations with Bess’s family I was given to understand that the young couple had decided not to become parents for at least two years after their marriage; this in order to give Ed an opportunity to accumulate a little something to serve as a basis to provide for the rearing of a brood, as well as in order to give Bess an opportunity to become better developed physically before she undertook the duties of motherhood. But at the same time, it was commonly known that both of the young people were passionately fond of children, and that both looked forward with the keenest pleasure to the coming of the day in which they would be surrounded with a little brood of “kiddies.” I mention this last fact in order that you may more clearly appreciate the irony of events which afterward attended the married life of these young people.

The two years rolled around very rapidly. During that time the gods showered every possible gift upon the young couple. Ed’s success became assured, and he became looked upon as a rising young architect by the older members of his profession. Bess developed in charm, and had she wished to become a leader of or more prominent in social circles she could easily have done



so, so popular did she become as time passed on. But she denied herself this ambition which would have tempted many another woman, and this because her mind and her heart were turning more and more toward the realization of a phase of life which seemed more and more attractive to her—Wifehood and Motherhood, these were her ideals, and the two were closely blended in her thought and feelings.

And the corresponding feeling seemed to fill the soul of Ed, particularly as the months rolled by, each bringing nearer to realization the longed-for event which was to bring to them the crown of their happiness. He was a most devoted husband during the trying days of the months which immediately preceded the wonderful event. He was never lacking in those little thoughtful attentions which are so greatly appreciated by the expectant mother. Every little wish of Bess was anticipated by him, and he seemed to take a keen pleasure in suggesting new wishes on her part, so bent was he upon making these usually troublous days ones of additional joyousness.

Their little strolls each evening were laughingly commented upon by their neighbors, and with good cause, because they resembled rather the moonlight wanderings of the courting couple to whom all the world was forgotten except "just us two." And Ed manifested a rare quality, so often missing in men, the quality of being able to enter into the imaginative flights of the expectant mother regarding the "this and that" of the little stranger whose coming was so eagerly awaited.

Surely, everyone thought, here is the ideal husband and wife; and here the ideal future parents! Had we known the now popular term "eugenics" in those earlier days, we would surely have pointed to these young people as a living example of the physical, mental and emotional mating which is the dream of the Eugenists, and which, were they universally present, would make over the race of mankind in a single generation.

Although perhaps somewhat atrophied in sentimental attributes, and somewhat hardened in my emotional nature, by reason of the disillusioning experience common to those who practice my profession for even half the time to which I have devoted to it, I must confess that I felt arising in myself strange sentimental urges and emotional symptoms which I had thought had been left behind forever with many other characteristics of

my youth, whenever I ran across these young people in these "second courtship" evening strolls preceding the confinement of the young wife. I would often smile to myself when they passed me without perceiving my proximity, so wrapt were they in their earnest talks and tender soul communion. Ah me!

Arrangements were made at a leading hospital to receive the expectant mother when her time of travail came. Bess felt no shrinking concerning the coming ordeal, but manifested the most girlish interest in the selection of the room which had been promised to be reserved for her at the time when the arrangement was made a month or so previously. She had selected the room because it had a beautiful view, and she harbored a pretty idea of her baby having its first look at the outside world through those windows, and getting its first impressions of its future habitation in the form of that charming view which so delighted herself. And Ed entered into the spirit of the thing like a schoolboy. And they often talked it over in their evening walks, toward the last.

Finally "the Day of days" came. Ed was telephoned one afternoon, and came rushing home. The family physician assured the young people that there was really no need of hurrying so, and that they had "all the time in the world"—but as well try to stop an avalanche as Bess and Ed at that moment; they would take no chances, even in face of the positive assurance of the good old doctor whose word they would have accepted without question concerning any other matter, and under any other circumstances. And away to the hospital they sped.

The little one was not born until the afternoon of the following day, as the physician had expected. Everything passed off very well, as might have been prophesied by reason of the sane preparation and course of régime made by the young expectant mother under the direction of the old physician who was old merely in years, but quite up-to-date in his methods. No complications arose. No unusual conditions were manifested. It was an ideal typical case in the opinion of physician and nurse and all concerned in the case. The only unusual feature is that the doctor and nurse violated what to them was a never-to-be-broken rule, inasmuch as they permitted Ed to remain in the room during the entire time of the confinement, and they afterward freely admitted that he was a help rather than a



hindrance, owing to the comfort and encouragement which his presence seemed to bring to Bess.

But after everything was over, and matters began to settle down, and Bess dropped into a peaceful doze, wearing on her face a rapturous smile, they had to "hustle out" Ed—they insisted upon driving him out into the uninteresting outside world, when all that was dear to him was confined in that hospital room. He protested, and wanted to stay, but here the physician and nurse were adamant. The physician drove him to his office, and Ed began announcing to everyone he met, beginning with the elevator starter, the fact that he was the happy father of the "finest baby in the world."

So happy was the young father, in fact, that he felt within him the irresistible longing to "celebrate the event;" and some of his friends were in nowise loath to aid him in the matter of the celebration. In fact, rumor had it that the celebration was continued well into the small hours of the morning.

But knowing the circumstances, and the fact of Ed's general steadiness, the few who heard the rumor smiled indulgently, saying: "Well, he'll have to be forgiven this time, under the circumstances!" And before long the matter was forgotten; this being made easy by the fact that the few who had heard of it were men, who, in accordance with that unwritten code of men concerning certain subjects which "women are apt not to see in the right light," forbore to mention the same to their better halves or female relatives. A little fling doesn't hurt anyone, they said—particularly when the fellow is such a steady-goer as old Ed; and, then, think of the ordeal he had just undergone, said they. But nobody suggested that Bess would have been the better for "a little fling" after *her* ordeal—that was different, of course. But the men's women folk were not advised of Ed's "little fling"—because, of course, they would not have understood such things, and would have been apt to get false notions about such matters outside of their sphere.

Ed was at the hospital bright and early the next morning. And he chafed at the wait he was forced to undergo before they would let him visit a little with Bess and "the baby." His heart flowed with parental pride as the little bundle of pink mortality was placed in his arms. Bess felt rewarded for all that she had gone through when she beheld the manifestation of paternal



pride. He was kind and gentle toward her, as usual. He told her how proud he was of her courage and fortitude, and how happy he would be when the little family would be again in their own cozy little nest. The old doctor beamed with pleasure when he saw the domestic picture, and he sighed to think how rare such cases were and how often the very opposite picture was presented to his view. Bess dropped again into a peaceful slumber, with the happy smile on her face; while Ed hastened back to the office to work still harder than ever in order to "buy a little rabbit skin to wrap the baby Bunting in." Everything was apparently as it should be with that little family.

The days at the hospital passed by slowly. Ed called every morning on his way to the office, and again in the afternoon after his day's work was done. And he and Bess discussed the little stranger, finally decided upon its name, settled the question as to just whom it resembled—as well as such questions are never really settled between the two sets of desires and fixed ideas. Finally, Bess was carried home bearing in her arms the little mite which was the outward symbol of the inward affection of the loving young people. There never was such a baby, thought both; there never was such a happy mother, thought Bess; there never was such a pleased and satisfied father, thought Ed; and there never was such a happy family, thought all their friends and neighbors.

Everything went along finely, at first. Bess regained health and strength as rapidly as might be expected of a young mother in good physical condition, and one who had observed all the rules of natural womanhood and approaching motherhood, and who had received the best of attention during the critical period at the hospital. She nursed the baby from the breast, as all fortunate babies are nursed. Nothing appeared to cast even the faintest shadow over the fortunes of the little family of three.

Then, gradually, there arose and manifested itself a disturbing condition of mother and babe. The mother began to look worn and tired, and lost her usual buoyancy. She lost weight rapidly, and her appetite far from normal. At first there were no indications of organic troubles, and the physician diagnosed the case as one of the too frequent cases of general weakness in nursing mothers. Her milk became poor in quality, and scant

in quantity, and resort had to be made to substitutes in order to supply the baby with its normal nourishment.

Then Bess began to experience pain in the region of the internal reproductive organs, accompanied with discharges of an alarming and unpleasant nature. The physician began to be worried over the case, and entertained fears of certain conditions which all in his profession have encountered at times in their practice. And, worst of all, he began to suspect the probability of certain frightful possibilities which for a long time his mind had refused to entertain as within the realms of possibility.

One night, the old family physician visited me, and we had a long talk over the case, particularly over those features of it of which he felt almost ashamed to have forced to his attention. As experienced as I had become in such matters owing to my years of disillusioning specialty practice, I utterly refused to agree with him as to the possibility of certain conditions which he was becoming to regard as possible, nay even certain; and nothing but my respect for his experience and his careful methods of thought and diagnosis restrained my uttering of a caustic rebuke to him for his presumption in even thinking of certain conditions in reference to the case. To me even his hesitating, halting suggestion seemed akin to suggesting the presence of poison in a freshly plucked bunch of choice grapes. But I agreed to assist him in a careful and thorough examination, and in the minor operation which seemed to be indicated in the case, under certain contingencies.

The examination was made, and alas! it seemed that his preposterous suspicions were on the eve of complete verification. The minor operation speedily followed, and the result was appalling. Passing over the details, I will say that a frightful condition of inflammation, and worse, was brought into evidence. *The fallopian tubes and ovaries were found in such a horrible condition that their ultimate removal was necessitated. The case was one of the worst I had ever experienced even in the case of prostitutes who had been diseased for years; and some of the conditions were so horrible as to render their detailed mention impossible in any but works intended for the reading of physicians and nurses only.*

Ed was in another city, engaged on an important case, at the time. Upon his return the family physician and myself told



him what had happened. He became furious with rage and indignation, and nothing but our comparatively advanced age prevented him from making a physical attack upon me. As it was, he abused us for our incompetence and inability to distinguish between a case of "female trouble" and that which we related to him. He even went so far as to accuse us of trying to excuse ourselves for performing a needless operation which we had performed for the sake of financial gain, and threatened to "expose our rascality," and to institute legal proceedings against us for the terrible damage which our acts had caused him and his wife. The thought of his Bess being charged with having contracted a loathsome venereal disorder, and having been compelled to be operated upon for same, was maddening to him. And when he realized that it would be impossible for her to bear him any more children, he acted like a maniac.

We advised him to call in another physician of his own selection; and this he did at once, choosing a man standing at the head of his profession in that city. This physician, after hearing our story, impressed Ed with the fact that there could be no doubt as to the conditions described by us and that all that had been done in the case had been necessitated by the discovered conditions. He also insisted that unless Ed wished to admit that his wife had contracted the disorder from others than himself, he must submit himself to a thorough examination; Ed accepted the latter alternative, of course, though asserting that there were no signs of venereal trouble in himself, and that had such been the case that he would have noticed same long since as he was familiar with such things.

The examination followed, and in spite of the absence of the usual indications of such troubles, it was found that gonococci were present in the secretion from the seminal glands. His was one of those comparatively rare cases in which these germs of venereal disease fail to manifest their virulent activity in the organism of the person who has acquired them, but nevertheless persist in existence long after the time of their contracting, in a state of latency, giving little or no outward indication of their presence, only to manifest their full and virulent activity when they are transmitted to the organism of another. In other words, while this young husband almost entirely lacked the symptoms and outward indications of this venereal disease, yet its germs



were present in his glands, and at the first opportunity were transmitted to his marital partner, and in her awakened to virulent activity, with the terrible result which has been pictured above. Had he suspected this state of affairs, he might have been entirely cured of the trouble by a competent physician, and this life tragedy averted.

But, the reader may ask, how did such a man contract these foul germs? Surely not during the days of his pure courtship and pure marriage relations of his last several years. *Alas, the tale which seemed so commonplace to him, as he told it to us, and which will seem almost incredible to you who have read of the character borne by him, is the tale of too many men who, while regarding sexual lapses as a crime in the case of a wife, consider the same act in a man as but a trivial incident, to be forgotten almost as soon as it is committed. And many of such men like Ed are really only ignorant—unaware of the nature of that which they do, by reason of the false impressions and ideas implanted in the minds of young men.*

Briefly, the story of Ed, as told by him to the three physicians to whom he unburdened his soul, was as follows: On the night in which he “celebrated” the birth of his first-born child, he fell in with a fast crowd of former companions, and drank far too much wine. The night wound up with a visit to a celebrated house of ill repute, where still more wine was drunk, and gay dancing indulged in. As the evening progressed, and the wine drove out what little wits the crowd of men had left, some of his companions played “a joke” on the young father by introducing him to the boudoir of one of the inmates of the place, where they left him in a maudlin state alone with the meretricious charmer. The rest may be imagined, though not to be told here. In the morning, he left the place, after having taken some bromide preparation to sober him, and hastened to the hospital eager to see his wife and the new-born babe!

Incredible, you say! Perhaps to you; but certainly not to those who have the false ideas and false standards of Ed and many other men of his kind. He told us that he felt ashamed of himself that morning after the debauch, but only in the sense that he had allowed wine to play the fool with him. His lapse from virtue, he said, aroused his conscience no more than did the overindulgence in the wine and the dance—it was all a part of

the "fling"—something to be ashamed of, in a general way, but certainly nothing of which to seriously accuse oneself.

That which in his wife would have been a crime meriting death at his hands, perhaps—certainly a speedy divorce—was to him when committed by himself merely a peccadillo—a trivial incident of his "celebration." He told us that he had experienced no sense of wrongdoing, or impurity, whatsoever, when he had visited his wife and babe that morning after, at the hospital. When it was suggested that the act showed a lack of love and affection for his wife, not to speak of disloyalty, he said: "Why that woman was nothing to me; I have forgotten even how she looked, or what her name was. My wife is the only woman I loved, or could love." It was an instance of that damnable heresy of the indulgence in the sexual relation without love, common to so many men, which had jaundiced his mind as it has that of many others.

Many, particularly women, may object that such conduct was impossible in the case of a man professing the character which I have pictured Ed as having. Such will say that either the tale is a lie, or else that Ed was not a man of the character attributed to him in the first part of the recital. All that I can say is that I have told the story plainly, and as true to the real facts, as possible. There are such men as Ed—many of them, in fact. *But the trouble does not lie so much in their "innate depravity" as in their ignorance—not as much in the "mortal sin" as in their false education regarding the Sex Life, and in the damnable heresy of the double standard of sex morality. These men do not need the aid of preachers as much as that of teachers. The fault is one of those foul weeds that grow and flourish in the dark corners of the cellar of Ignorance. The remedy is to "Turn on the Light!"*

\* \* \* \* \*

What of Ed, and Bess, and the baby, you ask? The baby died of malnutrition, and other disorders. Ed is a prosperous architect; Bess is still his wife—that is to say, she is still married to him; his real wife she has never been to him since the frightful revelation: it would perhaps be nearer the truth to say that she is a mother to him, rather than a wife—and a good mother too. She knows the cause of the trouble and has forgiven him for his

ignorance (for such she sees it to have been), but all wifely love in her has died within her heart. She has his interests at heart, and wishes to make him as happy as may be. She would even consent to bear children for him, if such were possible—for she knows the empty place in his life which can be filled only by children; but such is impossible, of course.

Ed sees it all now. He is under no illusions. *His hobby is to encourage the dissemination of scientific information concerning what has until recently been considered as Forbidden Knowledge. He smiles bitterly when he hears critics say that "such things should not be spoken of in public," or that "the less the young people know of such things, the better it is for them."*

But, in his heart there is found a constant cry: *"If I only had known; if I only had known!"*



## THE STORY OF BETTY AND BOB\*

THEIR parents had been next-door neighbors before they were born. They grew up together. In their games and plays, Betty was always the queen, and Bob was the faithful, loyal, obedient slave. He looked up to her as to a superior being. He considered her much smarter than himself—and she was. They went to school together. Bobby carried Betty's books and lunch basket, and Betty helped Bobby with his lessons. He was especially bad in 'rithmetic, a subject in which Betty was particularly good. Betty was a cute tiny little thing, Bob was enormous; he looked a giant beside her and it was curious to see the midget explain to the giant problems in mathematics or mooted points in geography. They were graduated from public school and entered high-school. The studies were becoming easier for Betty, they were becoming harder for Bob. But Betty's parents were comparatively poor, Bob's were rich. The law of compensation, if law it may be called, does sometimes hold good, tho not so very often; certainly not so often as Emerson would have us believe. Tho Betty helped Bob all she could, the studies were becoming irksome to him and while in his third year he left school. He knew he did not have to study for a living.

He entered his father's business, where he showed a good deal of ability and even initiative. The business was growing and he was sent out to San Francisco to open up a branch. He stayed away two years. Be came so fascinated with the game of money-making that he suffered no pangs of nostalgia, and to his parents' request to come home for a visit, he replied that he was too busy, that he could not leave the responsibilities of the office on the shoulders of subordinates. Perhaps it was not purely business that held him a captive in San Francisco. For the first time in his life he began to "*live*." He began to sow his wild oats. Brought up in a strict puritanical environment, he was shy and retiring, especially in the presence of the gentle sex, and at first he lived an almost secluded life. The attractions of the city of the Golden Gate made no impress on him. The taunts and remarks about his monastic life left him undisturbed. But

---

\* Dr. Wm. J. Robinson in *Never-Told Tales*, The Critic and Guide Co., New York City. (See Adv., last page.)

gradually his business acquaintances and "*friends*" who were anxious to help him spend his money, prevailed upon him to join the clubs of the *jeunesse dorée*, and before he was fully aware of it he was in the very vortex of San Francisco's gay life. *He was a puritan and when a puritan plunges into the so-called gay life, there is no stopping him. He goes to the limit and drinks the cup to the dregs.*

While his days were devoted to business, the nights were spent in revelry with 'Frisco's demi-monde, and the chorus girls found him a good thing. Betty, and Bob's mother would certainly have been slightly astonished had they been able to see in what company their shy, awkward, church-going Bob was spending his evenings. Luckily neither Betty nor his parents had any intimation of Bob's metamorphosis after sundown. The sleepless nights spent in debauchery began to tell even on Bob's robust frame, when he was suddenly taken ill; he at first paid no attention to it, for he was told laughingly by his friends that the illness was not a serious one; but it soon became very painful and it necessitated his staying in bed—flat on his back—for over four weeks.

An acute illness or an accident is sometimes a great blessing; it proves an important turning point in the lives of some people. I knew people who have learned to think, thought seriously for the first time, while on their back. Compulsory physical inactivity often acts as a cerebral stimulant.

Bob's illness made him disgusted with the life he had been leading and everything would have been all right, had not the disease left a legacy, which was destined to have an important influence on Bob's future life.

Bob's father was getting old, he began to ail and he wrote to his son that his presence was more important at home, in the main office, than in San Francisco. Bob was glad to return. He had had enough of gay life. He left a competent manager and hied to his paternal roof. Among those who came out to meet him was Betty. He looked at her with delight and amazement. He always had a high admiration of her—perhaps also a little fear—and now to the feeling of admiration was added that of a sincere and passionate love. Betty had gotten thru with college, life was smiling on her and she, in the happiness of young healthy womanhood, was smiling on the world. She was still a head



shorter than Bob, but intellectually and morally—she was head and shoulders above him. Bob felt it. He even had a suspicion that he was not quite worthy of her. But where is the man who will relinquish the woman he loves merely because she is purer than he physically, or superior to him mentally and morally? And, besides, Bob had imbibed the generally prevalent notion that money covers up all imperfections. Bob was rich, Betty was poor. If he married her, she would lead a life of comfort and luxury; if he did not, Betty would have to work, to teach high-school or something like that. It did not cost him much endeavor to convince himself that in asking Betty to become his wife he was doing a charitable, nay, a very noble act.

He proposed. Betty expected he would, and she accepted him. Not because the prospect of a care-free, luxurious life lured her. No. Betty was not exactly that kind of a girl. Ideal girls are still met with in real life. They are not numerous, but we can still encounter them, even outside the covers of sentimental novels. Betty accepted him because she rather liked him. She was used to him. She knew he was a good and kind-hearted fellow. And that was the principal thing in a husband. Betty was old-fashioned enough to believe, that a kind heart is more important than a brilliant head. And while she knew that Bob would never discover gunpowder, she also knew, or thought she knew, that he was a man to lean on. And every woman, be she ever so intellectual, will readily exchange all her abstract knowledge, all her independence, for the security of married life, for a steadfast man with whom she can frolic in fair and sunny days and on whom she can lean with assuredness in dark and stormy weather. And perhaps—who knows?—she was also unconsciously influenced by Bob's constantly growing fortune. One may not be aware of it, but a life entirely free from material cares does appeal powerfully to one's innermost soul. Bob was accepted and the wedding was celebrated with great pomp and extravagance. The vulgarity of it grated slightly on Betty, but she was not the master of ceremonies.

Five years passed. Bob's father, old Mr. Carey, had been dead for over two years and Bob is the sole owner of the tremendous business, which has been growing steadily and has put him in the millionaire class. Are Bob and Betty happy? *Apparently.* Perhaps not quite so happy as during the first two



years. A vague, indefinable shadow seems to have crept into the luxurious household. A little damper seems to have been thrown on the effusiveness of Bob's feelings. In fact, tho he would not at first confess it, he feels a grudge against Betty. What is the matter? Has he tired of her? No. But Bob wants an heir, a male heir, to his growing fortune, and Betty is not giving him any heirs. In fact she is not having any children at all. She feels guilty, poor thing. For equally with Bob she is sure that it is she who is to blame. It certainly could not be Bob's fault. Such a strong, powerful man, in such perfect health . . . while Betty is rather slight and delicate; tho nothing seems to be the matter with her.

He hated to broach the subject, but he finally got together enough courage to do so. He wants her to be treated. Perhaps a little treatment at the hands of a prominent physician would bring matters around all right. He heard of such cases. Tho with a heavy heart Betty agrees. What will a wife not do to satisfy her husband, especially where she thinks she is not entirely fulfilling her part of the marital contract? And besides, she does want to have children, she passionately, longingly wants to have them. Bob does not fill up her entire life. Every year the void is greater. And she wants children to occupy her heart, her mind, her time. She knows that within her is a deep well of maternal love, which is going shamefully to waste.

And so one morning she and Bob drive over to the most fashionable gynecologist in town, Prof. J. Bob explains the matter in private and tells the doctor that money is no object. He does not want to know what the fee is; let him use his best skill and then send in the bill. *And Betty enters upon a course of irksome, unpleasant and occasionally painful treatment. Her womb was cleansed, painted, douched, curetted, tilted, supported and what not.* The famous gynecologist said that it would require a very long course of treatment, before any results could be expected, and for three years off and on Betty bore it painfully and resignedly. The only result, however, of the treatment was a bill for four thousand dollars, the doctor declaring that he could do no more in the matter. Bob paid the bill ungrudgingly, but his grudge against Betty took on a deeper hue. And tho he faithfully tried to conceal it, it did not escape Betty.

Two years more passed. Bob and Betty had been married

ten years, and still no heir. And Bob was getting like one obsessed on the subject. It became his *idée fixe*. To the perfectly legitimate desire to leave a descendant was superadded the vulgar fear—what will become of all my fortune when I die? He brooded on the subject day and night; he became gloomy and irritable, occasionally rude, and Betty had long ago given up the attempt to soothe and pacify him. She lived her own life, chiefly among books, and Bob lived his own. Things were becoming strained.

Bob said he had to go away on business for a few days. He went, and after he was gone for about a week, Betty received a long letter from him. She was stunned for the moment; it was a matter of hours before she was her own self. The lines in her face became a little harder, the expression a little graver—but that was all. If a storm was brewing within her, it could not be noticed on the outside. She gathered a few of her things, wrote a short note, and before nightfall she was gone.

What did Bob's letter contain? It was a jumble of excuses, apologies, repetitions, circumlocution, etc., but out of it all one thing stood out clearly. "In justice to himself and to his business" Bob thought that he must divorce Betty. He was too cowardly to tell her that *viva voce*—he was still a little afraid of her—a reminder of the older days—and so he had recourse to the usual instrument of the coward, a letter. He hoped, he said, that after she had thought over the matter carefully, she would see that he was not to blame, that he was right and that she would not put any obstacles in his way of getting a divorce. Of course he would provide for her liberally. . . .

The note that Betty left was of the following contents:

BOB: I have considered myself divorced for some time. You are free. I shall in no way be a burden to you in the future and I hope that our ways will never cross.

BETTY.

When Bob returned home and found that Betty was gone, he was at first overwhelmed with feelings of shame, fear and remorse. He was considering whether it would not be best to go to her, beg her forgiveness, ask her to forget his brutal letter, as if it never had been written, etc. But the intense egotism of the man got the upper hand, and very soon his feeling of remorse

gave way to a sense of satisfaction that Betty was making things so much easier for him. On the whole he was glad she was gone; he feared so much the explanations with Betty and the scenes which he expected would follow them. He wanted to communicate with her, but she was not to be found.

As a matter of fact, Betty was on her way to Europe. She had a little money of her own, she realized on her jewelry and was gone. She wanted to "*complete her education.*" For the last two years she had been stifling in the atmosphere of her home. As she was broadening under the influence of great books, Bob's narrowness, his smallness, his utter lack of idealism, began to pall on her more and more. It is doubtful if she ever would have taken the initial step in leaving Bob's house. Inertia, custom, habit are the world's greatest hold-down forces. But when Bob himself opened the door, she—the first shock over—could not walk out quick enough. And she could not bear to remain in her home town. A day seemed an age to her. It drew her into the world, she wanted to breathe the air of freedom, away from the neutral narrowness, deadly dullness, and condemning conventions of the society of which she was a member. And so away she went and Paris was her destination.

Bob applied for a divorce on the ground of abandonment, the papers were served on Betty in Paris, she did not defend the suit, and as money was no object with Bob when he wanted something, the coveted divorce was soon in his hands. And soon he married again. . . . The name is immaterial. But she came from a prolific family, was a healthy animal, a chic dresser, and worldly wise.

Three years passed and Bob was still without an heir. He was in despair. Tho not very hopeful, he took his wife over to Dr. R., who was becoming well-known both for his ability and his straightforwardness. He was a different sort of a man from Dr. J. His opinions were not influenced by the prospects of fat fees. He examined Mrs. Carey II. and could find nothing wrong with her. *Dr. R. was up to date and he knew that in cases of sterility the husband is much more often to blame than the wife is.* He asked Mrs. C. to wait in the parlor and asked Bob to come into the office. He took his entire early history, subjected him to a searching quiz, which made Bob feel as if he was undergoing the third degree. He then sub-



jected him to a physical examination, made certain microscopic tests and as a result of which he told him rather curtly:

*"Mr. C., the only way Mrs. C. could have children for you, would be by getting herself another husband. You will never be the father of any children. It is the legacy left you by your illness in San Francisco. No, it is absolutely useless for you to undergo any treatment. We are powerless to do anything in a case like yours. Anybody who will undertake to treat you, will be obtaining money under false pretenses. But there are plenty of charlatans who will be glad to have you as a patient. Good-day."*

Bob walked out as one on whom a death sentence had been pronounced. His wife was shocked at his appearance. His color was ashy, his knees were shaking. He became gloomy and morose. But Robert Carey was not a deep feeling man. Gradually he became reconciled to his condition. Only he began to worship Bacchus more assiduously, and he spent more of his evenings at the club, leaving Mrs. Carey to find amusement elsewhere.

And as he would be sitting puffing a rich Havana the vision of the sweet and calm face of Betty, the only human being he ever really loved, would appear in the clouds of the tobacco smoke. Where was she now? What was she doing? And as he recollected the painful, humiliating, unnecessary treatment to which Betty was subjected for three long years, he felt a sharp pang of remorse; and as he thought of the unjust and useless divorce, as he compared the good, faithful Betty with the present selfish, amusement loving and rather loose Mrs. Carey Number 2 he felt sick at heart. And then he ordered another bottle of champagne.

\* \* \* \* \*

Bob and his wife were returning from Europe. Mrs. Bob had a great time. She made numerous friends, not all of irreproachable character, and her liaisons were becoming the talk of the smart set. Bob had to look on, grin and bear it and say nothing. He did make some objection at first, but Mrs. Bob paid not the slightest attention to them. She was getting coarser and bolder and told Bob plainly that she went to Europe to have a *"real good time"* and if he did not like it, he could go back to

the States. He had his good time in his youth, now she was going to have hers. And she made some remark referring to their visit to Dr. R. which made Bob wince. And he never made any further objections. And now they are returning from Europe, and it is a beautiful day.

They occupy the most expensive stateroom on the upper deck, but it is doubtful if the cheapest berth in the steerage will receive that night an individual more miserable and more disgusted with life, than one Robert Carey, Esq. On the same steamer with the Careys is the famous American author, Thornton, with his wife and children. And when they go down to dinner the Careys find themselves seated at the Captain's table, opposite the Thorntons. And as Robert Carey, Esq., looks up at Mrs. Thornton, the olive which he is carrying to his lips drops out of his fingers and rolls on the heavy carpeted floor, his lips quiver and a mist covers his eyes. For radiant and happy, with a sweet, perhaps slightly pitying smile, sits before him—his former Betty. On her right is her husband, who seems to have eyes for nobody but her, and to the left of her sit her two little manly boys, and a cherub-like little girl. There is a strained introduction, hardly perceptible, bows are exchanged, and an awkward silence ensues. Mr. Robert hardly tastes his dinner. He excuses himself, leaves the table before the dessert is served, and shuffles away to the darkest and remotest corner of the steamer. As he looks upon the opening and closing furrows out on the smooth ocean mirror by the wheels of the giant steamer, he thinks. Perhaps he never before thought so deeply. And this is what he thinks:

*"Ignorance has ruined my life. Ignorance of its dangers made me throw myself into sexual promiscuity. Ignorance of the means of prevention caused my infection. Ignorance of the possible future dangers caused me to neglect treatment, until too late. And ignorance, stupid, brutal, inexcusable, ignorance, ignorance on my part and dishonest cupidity on the part of Dr. J. caused me to lose, to deliberately drive away from me, the dearest, sweetest, gentlest and kindest woman on earth, the only woman I ever loved, the only woman I ever will love, until I breathe my last."*

And leaning against the railing he stood motionless for many, many hours. And he meditated as he never did before.

There is no stronger stimulus to thought than an irretrievably lost love, a love lost thru our own shortcomings. And after a while a thought came to his mind, the noblest thought that he had probably entertained in many years.

"There is no evil without some good. Perhaps it is better so. See how happy she is. Could I have made her so happy? No. In a childless, cheerless, narrow home she would have withered away. It does not require a deep insight to see that she leads now a full, satisfying, happy life. . . . Perhaps it is better so." And this altruistic thought helped him to bear with a semblance of outward calmness the six days of the trip, which would otherwise have been an unbearable torture to him.

Mr. and Mrs. Carey live in the same house, but they are practically strangers to each other. She goes her way, *boisterously*, he goes his way, *quietly*. He has no hopes, no expectations, but he has learned to be resigned, and he bears his cross unostentatiously. And frequently—and as the years go by, more and more frequently—he takes out a miniature from his pocket case and looks at it, long, long. . . .



## THE CASE OF THE MARTINS\*

THE marriage of Fred Martin and Ethel Wright was one approved by the respective families and many friends of the two young persons, and their wedding was one of the bright events of the season. Both were members of the younger set of the oldest and most respected social circle of their home city, and the church was filled to overflowing with some of the "best people" of the town. The general opinion was that the young couple had entered married life under the most favorable aspects. The girls envied Ethel; the young men envied Fred; and the older married people envied the newly-wedded pair.

Ethel was what her friends called "a sweet girl." She was womanly and gave promise of developing into the ideal wife and mother. She was well educated, yet showed no alarming "high brow" tendencies. She enjoyed the social life of her set, yet one could see that the attractions of society would never cause her to neglect her home and family. She was pure in heart, yet not a prude. She was innocent, yet not entirely ignorant of some of the plain facts which many have insisted should not be known by the unmarried woman. In short, she was a very satisfactory specimen of the modern normal, healthy-minded young woman.

Fred Martin was a very fair average specimen of the young man of his particular social circle. He gave promise of becoming a good business man, and had already shown indications of ability in managing some of the minor departments of the manufacturing business owned by his father and uncles. He had graduated from college along with the rest of his class, neither lagging behind nor yet standing in the front rank. The word, "average" seemed to come into one's mind when thinking of this young man.

Fred, while not becoming known as a particularly "fast" young man, and while having a reputation for never drinking more than was good for him, nevertheless had sown his share of the "wild oats" which Society seems to consider indispensable in the case of young men, evidently closing its eyes to the frightful

---

\*Dr. Robert B. Armitage in *Never-Told-Stories*, Advanced Thought Publishing Co., Chicago.

crop which so often springs up after the sowing season has passed. He had "gone the pace" more for the purpose of keeping up with his associates than from any particularly licentious motives. He had visited houses of ill repute, and had associated with their inmates while "out having a good time," but was said by his friends never to visit such places at other times.

As the result of these experiences, and the lack of the proper instruction on certain important subjects, Fred had acquired the conventional mental attitude of young men regarding the subject of the physical relations between the sexes. His ideals concerning the matter had been largely influenced by his association with prostitutes, and he was lacking in that appreciation of the finer shades of feeling concerning these important relations which are entertained by women of refinement and culture. Without being naturally gross and brutish in his appetites and tastes, yet in this particular thing he was miles away from the ideals of a refined woman concerning the same fundamental facts.

Fred was not very different from most of his young men friends in this respect. It is one of the tragedies of life that men and women are so far removed in understanding and natural feeling concerning the elemental facts of the sex relationship between man and woman. The young man is apt to emphasize the physical relations in the manifestation of affection between man and woman; while to the young woman the more subtle elements of the association are emphasized, the physical relation being felt by her to be only an incident of the greater relationship. With most women "love" is the one important thing, and the physical expression the incident; while to most men the physical expression is the important thing, and "love" is regarded as merely incidental. Of course men do not think of these matters in just these terms, and may resent the statement above made—but their actions show their general attitude, notwithstanding their protests and claims to the contrary.

The average woman utterly fails to understand the ability of the average man to divorce the physical relation from love—or the man's willingness to manifest the physical relation without the presence of love. She knows that men often do make this separation, and often indulge in the physical relation without the accompaniment of the affectional feeling and sentiment—but she fails to understand it, finding no corresponding urge within her—

self. On the other hand man is too apt to consider that the woman's willingness to participate in the physical relation must spring from the same source as does his—he attributes to her the same motives, and thus entirely loses sight of the characteristic viewpoint and nature of the woman. He utterly fails to understand the woman-nature.

In another way, Fred shared the characteristic false-knowledge of his sex. From the lack of proper instruction on the subject, young men acquire a more or less distorted, coarse and impure conception of the marriage relation and the incidents thereof. They find in the physical relation a subject for ribald mirth, coarse joking, and sneering comment. They have usually been brought in contact with a class of women who have lost their original respect for their sex-nature, and who now gain a livelihood by catering to man's lowest passions. Gradually the ideas and conceptions of the young man suffer a degeneration; and while grossly indulging his animal passions, he views them with a scornful contempt.

The young man suffers from his false education regarding the sex-nature of woman. He regards the sex-relation as essentially gross and impure, and although he may indulge in it he feels that he owes himself an apology for so doing. Naturally, this feeling extends to the women who submit to his desires and whom he feels have descended to his own low plane in order to meet him. He respects womanhood in the degree that he regards it as divorced from the physical sex-relation. He utterly fails to get the pure woman's viewpoint in which the physical relation is regarded as merely the accompaniment of love, and unthinkable under any other circumstances. He knows that the physical sex-relations with which he has become familiar have had little or nothing to do with affection and love—they have been merely an appeal and response to lust and vulgar passion—and he has no knowledge of the higher phases of the relations between the sexes, which, if known, would entirely change his mental attitude in the matter.

None of these thoughts, however, were evident to Ethel during the days of courtship and the period of engagement. Fred was a tender, respectful lover, and nothing in his words and actions ever gave to her a hint of the lack of understanding on his part to which we have referred. *In the case of many lovers*



*there is manifested this strange paradox, or quality of feeling, which tends to deceive the woman ignorant of the ways of men. On the one side, the man honestly feels and manifests the chivalry and tender love of knighthood, while on the other side there is lying nascent within him that which will later manifest in brutal, gross, selfish lust and animal passion, awaiting merely the opportunity of gratification which will be furnished by the marriage ceremony.*

*I wish, however, to emphasize the fact that the greater part of the trouble arises from want of knowledge and sane education on the subject—or perhaps I should say, from the presence of false-knowledge and false-education derived from association with women of low ideals and debased lives. There are many men who have been given the proper instruction on the subject, and who have become acquainted with the true ideals of sex, who approach the marriage state with quite a different mental attitude—and happy is the bride who enters into marriage with such a man. I would repeat, with as much emphasis as possible, that the failing of the man is the result not of total depravity or inherent coarseness on his part, but rather from false-education, abnormal experience, and ignorance.*

Those who have read the foregoing paragraphs may readily imagine the possibilities for disillusionment and future unhappiness in the case of Fred and Ethel Martin, as they left the altar before which they stood when they were pronounced man and wife. And the same possibilities, probabilities, nay, the certainties, are present in the case of thousands of young married couples every day. *Into no other serious relation of life would men and women think for a moment of entering without careful instruction and the acquiring of the correct information; but, here, into this most important of all human relations, the young man and the young woman enter without a word of advice or warning. Certainly, every mother owes it to her sex to inform her son concerning certain facts without which information he may wreck the happiness of his home and family—but how few mothers dare to broach the subject to their sons.*

\* \* \* \* \*

In after years, Ethel Martin was able to calmly look back over the terrible happenings of her first few days of married life—that period which we with unconscious humor style “the

honeymoon." But at that time it seemed to her that she had been grossly deceived and betrayed by the man to whom she had given her love and the making or marring of her life's happiness. The revelation had come as a terrible shock to her—the disillusionment was complete. *She had seen her knightly lover transformed into a gross, bestial creature, devoid of all decent feeling, and seemingly desirous of revelling in the most vulgar debauchery.* The woman, expecting even more tenderness and thoughtful consideration than that manifested by the man in the days of their courtship, found such a manifestation entirely lacking, but in its place a brutal disregard of her finer feelings and refined sensibilities. She felt that she had been outraged, and had been made to play an unworthy part in an indecent and degrading performance. She found herself thinking, over and over again, "*This, this then is what I am wanted for.*"

Ethel's experience is but that of many another young bride. Too often, the husband entering into the marriage relation with distorted ideals and lack of education, commits a very grave offense against the person of his young wife—and this at the very beginning of their marriage relation. *Many a bride has been so shocked, horrified, and disgusted by the ignorance, brutality and sensuality of her husband—by his utter lack of respect for himself, herself, and for the ordinary decencies of life—that her love has taken wings, never to return.* Thereafter ensues a deplorable condition, maintained by the economic dependence of the woman, the fear of public opinion, and the acceptance of the apparently inevitable, in which the relation of the married pair degenerates into a sort of dull, drab neutrality, with lives blunted and dulled, and with deceit as the prevailing characteristic of the counterfeit union.

*Every physician knows of many instances of almost unbelievable grossness on the part of otherwise considerate, thoughtful and kind men, on the occasion of "the first night," and the succeeding days and nights, of the "honeymoon."* And, this, as I have said, does not result from any innate depravity or grossness of the man, but rather from his lack of knowledge, and his false education on the subject, the latter having been obtained from inmates of the brothels he has frequented. Many a man, in after years, when he has learned the truth about these matters, has been mortified beyond measure, and grieved of heart in equal



degree, when he remembers his own experience in the days and nights of early married life. But often this knowledge and remorse comes too late—for the love of the woman has been forever lost to him.

You think that I am placing too much emphasis upon this incident, do you? Then talk to any intelligent family physician about the matter, and ask him to tell you his experience regarding such things. If he is frank with you in the matter, you will agree that I have understated, rather than overstated the case. Let me, for the first and last time in this book, ask you to allow me to quote from outside authorities. Here follow the statements of three well-known, and highly respected authorities of this important subject, taken from books of wide circulation:

(1) "When first entering upon the marriage relation, young husbands are in danger of making some very serious mistakes. Many a husband has had cause to regret that in his lack of consideration he has allowed his passion to awaken in his life such a feeling of disgust as to obliterate her affection for him, to blast the prospects of all future happiness, and to render both himself and his wife miserable throughout all their subsequent years. With ignorance on one side, inconsideration and ungovernable passion on the other, the combination is unfortunate and the results often serious. The first act of the drama which is to culminate in separation and an effort to secure a divorce, is often enacted upon the night of the very day which witnessed the marriage ceremony. The ignorance and inconsiderateness, or both, are alike to blame for this sad result—the wife for her lack of knowledge and consideration, and the husband for his lack of intelligent and thoughtful appreciation of the delicacies and dangers of the new relation. *It is enough to make a thoughtful and considerate man blush to think of the scores of wives who annually confess to their physicians that the only rape that was ever committed upon them was by their own husbands, and on the first day of their married life.*"

(2) "Tenderly and with great consideration should these privileges be accepted, for, contrary to the opinion of many men, there is no sensual passion on the part of the bride that induces her to grant such liberties. Then how exquisitely gentle and forbearing should be the bridegroom's deportment on such occasions. *Sometimes such a shock is administered to her sensibili-*



*ies that she does not recover from it for years, and in consequence of this shock, rudely or otherwise administered, she forms a deeply rooted antipathy against the very act which is the bond and seal of a truly happy married life."*

(3) "Do not be in too great haste to brush the bloom from the fruit you covet. It will lose half its attractions at once, if you do. Practice in lawful wedlock the arts of the experienced lover, rather than the violence of the man who commits rape, and you will find the reward of your patience very sweet and lasting. This bud of passion cannot be rudely forced open. Its development must be the work of time. *If the young wife is met with violence, if she finds that her husband regards the gratification of his own desires more than her feelings—and if she be worn and wearied with excesses in the early days of her married life, the bud will be blighted.* The husband will have only himself to blame if he is bound all his life to an apathetic, irresponsive wife. It is easy to imagine the unsatisfactory conjugal relations which are brought about in punishment of the husband's early impetuosity and ignorance. He finds an unreciprocal wife, and doubts her affection for him, because, with his masculine nature, he cannot conceive of a love unblended with passion. She, in her defrauded womanhood, feels aggrieved and debased by any conjugal approach—especially an enforced one—and finds it equally hard to understand how affection and passion can be united; the one she knows to be so self-forgetful and denying, and the other she has such abundant cause for believing utterly selfish and rapacious."

\* \* \* \* \*

The first year of the married life of Fred and Ethel Martin served only to widen the chasm between them which had been opened by the ignorant and thoughtless conduct of the husband at the very beginning of their "honeymoon." And in this process of increasing separation of the two natures, there was manifest the same evil factor which was at the base of the first breach—**IGNORANCE!**

Fred Martin shared the opinion of many men of all circles of life—the opinion regarding "husband's rights." Without ever having thought much of the matter, he accepted as one of the facts of life the idea that women should "submit themselves unto their husbands," without questioning or protest. To him, and to

his kind, there could be no "wrong" in the marriage relation—the legal and religious sanction transformed all things into "right" ones. He considered it "natural" for the woman to so submit herself, never stopping to think that even the female of the lower animal kind possesses, and infallibly exercises, the right and privilege of consent or refusal; and that the unmarried woman of the human race does the same, except in case of rape; it being reserved for the "civilized" married woman, and the female slave, alone, to become the sexual "property" of a man, according to law and custom.

It is time that men should learn that "husband's rights" are often "husband's wrongs." To assume that a man has a "right" artificially acquired in the old state of serfdom to which woman was subjected at one time in the history of the race, and one which has no correspondence in the free natural life of either the human race or of the lower animals. The female animal acknowledges no such "right" on the part of the male—neither did primitive woman. The primitive woman, and the female animal, will defend with her life her right to her sex-self, as against the undesired male, or even against a favorite male at an undesired time. And the primitive man, and the male animal knows enough to respect this natural feeling on the part of the female—even though she be his lifetime mate; and so does, or will, the civilized man who has acquired wisdom on the subject.

And, so, as the months rolled by Fred lost the slight vestiges of Ethel's love for him which had survived the first shock of disillusionment. And Ethel began to manifest the characteristic physical appearance of the woman whose sex nature is outraged in this way. She lost color, and her spirits drooped, and she began to show signs of a nervous breakdown. Not only was her husband regardless of her wishes, desires, and natural inclinations, and insistent upon subordinating everything to his own desires and passions, but he was also ignorant as to the normal extent, limits and frequency of the gratification of his passions. Ethel's case, as afterward related to her physician, disclosed an almost unbelievable abuse of normal function—*but such cases are far from unusual in the experience of the family physician.*

No children came to the Martins. The couple drifted apart gradually. After a time, Ethel sought to escape the bondage of her matrimonial relations by frequent and long extended trips



and vacations to far distant places. She traveled much, and it was noted that she was never so well and attractive as after she has been away from her husband for several weeks. Then the roses returned to her cheeks, and her spirits rose to nearly their old level.

After a time the husband and wife drifted so far apart that they practically led their own lives, each without regard to that of the other. They were now married merely in name, and all the usual relations between husband and wife became a thing of the past with them. Finally they appealed to the divorce courts to sever the bond that was indeed a "bond," the pressure of which was eating into their souls. The end of the play had come. Was it a tragedy, or a farce?

\* \* \* \* \*

Fred has married again—this time to a fashionable widow of a somewhat over-developed sexuality, who demands of her new husband an excessive compliance with her desires similar to those which he had previously demanded of his former wife. By the irony of circumstance he is subjected to the same one-sided exercise of "rights" that he had previously so rigorously insisted upon on his own part. His new wife tyrannizes over him in many ways, chief of which is by open or veiled threats of seeking more congenial male associates if he should fail to render to her that conjugal attention and marital devotion which her nature craves, and which she demands as her normal "right." He is showing signs of broken health, and is likely to become a nervous wreck; beside which he is drinking heavily and neglecting his business. He lives in a state of jealous irritation, and his mind is filled with suspicion of his wife, for he reposes not the slightest trust in her loyalty, and he knows that she has not a particle of true affection for him. He has become the victim of poetic justice, and in the words of the old operatic verse "the punishment fits the crime," in his case.

\* \* \* \* \*

Ethel passed through a long period in which she hated all men, and in which she saw only the beast in them. Finally, however, she yielded to the devotion of a man of about forty-five years of age—about the last man in whom she would have been thought to take an interest. This man was a widower, and had the reputation of having been the participant in several cele-



brated cases, two of which had resulted in newspaper scandals and divorce proceedings on the part of the injured husband. He was very attractive to women, and seemed to fascinate them—for he understood them.

Ethel knew of the reputation of the man, and at first dreaded him as representing what to her was such a hateful thing—the passions of man. But subtly the man gradually impressed her with the idea that though his morals might have been open to just criticism, still he was not a “beast” in certain ways known only too well to her. Ethel seemed to attract him in a different way from the women of his former experiences—he seemed to perceive in her (and it really existed there) an undeveloped love nature which waited the approach of “the right man” to mature into full blossom, perfume, and beauty. And, finally, Ethel accepted his offer in marriage, after a most unconventional conversation with the man, and a frank statement and promise on his part—the latter, by the way, having since been conscientiously kept by him.

This marriage, singularly enough—or, perhaps naturally enough—proved very successful. Ethel found her new husband to be everything which the old was not, and lacking in the objectionable traits which had caused the first marriage to be a failure. From the first, *he manifested the attitude of a lover toward the woman he had married, and in every way sought to avoid shocking her sensibilities or arousing a protest from her womanhood.* It may be objected to that in this he was but exercising the arts of the practiced lover, the efficacy of which he had tested by previous experience—but I have nothing to say about this, for I am but relating the results in the case. *Ethel responded to the method of her new husband, and gave to him that which she had never been able to give to Fred—the full manifestation of wifely love.* The two had now been married for several years, and their friends jokingly refer to them as “the perennial lovers,” so ideally do their respective natures harmonize and blend. Some, somewhat cynically, have been heard to say “I do not believe that they are really married—they seem to be too much in love with each other.” But, they themselves know that they are one of the few who are “really and truly” married, and, therefore, so much in love with each other.

PART IV

SELECTED POEMS

GLOSSARY

AND

BIBLIOGRAPHY





## PART IV.

# SELECTED POEMS, GLOSSARY AND BIBLIOGRAPHY

---

### WILD OATS

“**A**H, let them alone—” ’tis the age-old cry—  
“Boys will ever be boys, you know;  
They must plow the world to the rim of youth,  
The fields of wild oats they must sow.  
Let them alone—they are immune  
To leash of straight-laced moral code.  
BOYS WILL BE BOYS; they measure life  
By laws that license has bestowed.”

This is the hectic creed of the years,  
The damning lie that parents preach  
To ease their conscience of the blame  
For higher goals they failed to reach.  
Immune, these sowers of wild-oat tares?  
There’s never a single garnered field  
Where sickles of sorrow have cut their swaths  
But tells its tale of a misery yield.

Go, look in the wards where the maniacs rave,  
Their brain cells brimmed with liquid fire  
Through mad misrule of uncurbed wills  
Or the blight of a foul desire.  
And count, if you can, the blameless hosts—  
The waifs unfathered and unnamed—  
Who, under the light of God’s blue sky,  
Must live their cheated lives ashamed.

And, ah! the “drunks” and the derelicts  
Lined day by day at the judge’s bar,  
And the man who limps on a shriveled limb—  
A horrible, visible moral scar!

And the frightened girl with her shame revealed  
 Leaping down where the moonbeams quiver,  
 Her epitaph but the scornful line:  
 "A floater dragged from the river."

And the men hard-lipped and filled with fear  
 As they slip from the doctor's door,  
 Hiding his verdict of loathsome taint—  
 (O, the wives who must pay THAT score!)  
 Hating the secret noisomeness  
 That saps with its creeping ills,  
 Hating the wild oats that they sowed  
 In the lustful pace that kills.

These are the boys who "would be boys"  
 Not held to straight-laced moral code.  
 The boys who measured their golden youth  
 By laws that license had bestowed.  
 They tread the trail where the serpent crawled  
 And are slimed with its vicious stain,  
 They plow their oats with the plow of sin  
 And reap with the sickle of pain.

### L'Envoi

And the gleaners who come in the after-years—  
 Generation born under that spell?  
 In taint of body and smirch of soul  
 They garner an endless hell!

—*Sara Beaumont Kennedy.*

---

## THE PRICE HE PAID

BY ELLA WHEELER WILCOX

I SAID I would have my fling,  
 And do what a young man may;  
 And I didn't believe a thing  
 That the parsons have to say.  
 I didn't believe in a God  
 That gives us blood like fire,  
 Then flings us into hell because  
 We answer the call of desire.

And I said: "Religion is rot,  
And the laws of the world are nil;  
For the bad man is he who is caught  
And cannot foot his bill.  
And there is no place called hell;  
And heaven is only a truth,  
When a man has his way with a maid  
In the fresh keen hour of youth.

"And money can buy us grace,  
If it rings on the plate of the church;  
And money can neatly erase  
Each sign of a sinful smirch."  
For I saw men everywhere,  
Hotfooting the road of vice;  
And women and preachers smiled on them  
As long as they paid the price.

So I had my joy of life;  
I went the pace of the town;  
And then I took me a wife,  
And started to settle down.  
I had gold enough and to spare  
For all of the simple joys  
That belong with a house and a home  
And a brood of girls and boys.

I married a girl with health  
And virtue and spotless fame,  
I gave in exchange my wealth  
And a proud old family name.  
And I gave her the love a heart  
Grown sated and sick of sin!  
My deal with the devil was all cleaned up,  
And the last bill handed in.

She was going to bring me a child,  
And when in labor she cried,  
With love and fear I was wild—  
But now I wish she had died.



For the son she bore me was blind  
 And crippled and weak and sore!  
 And his mother was left a wreck.  
 It was so she settled my score.

I said I must have my fling,  
 And they knew the path I would go;  
 Yet no one told me a thing  
 Of what I needed to know.  
 Folks talk too much of a soul  
 From heavenly joys debarred—  
 And not enough of the babes unborn,  
 By the sins of their fathers scarred.

—From *The Cosmopolitan*.

---

### FIVE DOLLARS A WEEK

**T**HUS is it down in Beelzebub's books,  
 August the 17th. Isabel Brooks.  
 Home in the country, folks decent but poor,  
 Character excellent, morals still pure.  
 Came to the city today and found work;  
 Wages five dollars, department store clerk.  
 Wages five dollars, to last seven days;  
 Three for a miserable hall bedroom she pays,  
 Two nickels daily the street car received;  
 One dollar forty for eating that leaves.  
 One-forty has quite a long way to reach.  
 Twenty-one banquets at seven cents each.  
 There: every penny of wage has been spent;  
 Squandered for eating and riding and rent.  
 Spendthrift: she ought to remember life's ills;  
 How in the world will she pay doctor's bills?  
 What if she's furloughed? There's always a chance:  
 Isabel ought to save up in advance.  
 Hold: I've not mentioned her clothes, she must wear  
 Dresses, hats, stockings, shoes, ribbons for hair.  
 Where shall she get them? Suppose that we stop.  
 Perhaps we would better just let the thing drop.

You, good math'metician, may figure it out;  
 It's a matter of figures, or *figure*, no doubt.  
 Look at this picture, it's better I'm sure,  
 Character excellent, morals still pure.  
 What else is written we'll not look to see,  
 Why! As I live, there's a tear in his eye,  
 What in the world can make old Satan cry?  
 Surely the Devil is feeling his age:  
 Look what he's written on Isabel's page:  
*"Virtue's a luxury hard to afford,  
 When a girl hasn't money to pay for her board."*

—Herbert Kauffman.

### THE WOMEN WHO WALK

THE street lights gleam, and the buildings tower,  
 In the lazar city by the sea,  
 While the silent gloom, like stinking spoom,  
 Awakens misery.

And women tramp the streets so damp,  
 Shorn of their modesty.

Their smile is hard, and their faces wan,  
 And they cringe as they walk along.  
 There's none of God in their sinful nod  
 As they hum a ribald song.

But these women tramp the streets so damp,  
 To the streets their kind belong.

There is much of woe, in their frozen hearts,  
 Where erst dwelt melody;  
 They've wedded shame, and lost their name,  
 For all eternity.

Always they tramp, the streets so damp,  
 Lost in iniquity.

God came down, one night on the town,  
 To learn if He could, whence came  
 These accusing sobs, from the drunken mobs,  
 That seemed His throne to blame.  
 He there did tramp, the streets so damp,  
 Beside the women of shame.

But He soon went back to her harpists,  
 Back to infinity;  
 And He said as He went: "The real intent  
 Is born of poverty,  
 The women who tramp the streets so damp,  
 Need more than chastity."

He strolled through the streets of Jasper,  
 He came to the judgment hall,  
 And then He took the sinner's book,  
 And wrote in infinite scrawl  
 "The women who tramp the streets so damp,  
 Have drunk this cup of gall."

\*   \*   \*   \*   \*

Pity them, cheat them, curse them all,  
 Enjoy them if you must;  
 Some man's to blame, for a woman's shame,  
 Because she built on trust.  
 And those who tramp the streets so damp,  
 Are lost through manly lust.

—Clem Yore.

### THE UNDERWORLD

**H**ARK! to the cries of the Underworld!  
 List to their sobs and moans!  
 Blush when you hear their curses  
 That chill your very bones.  
 For they are lost and the hateful,  
 They are the city's sores,  
 Each day they die by hundreds,  
 Beside your very doors.

You fathers and mothers, attention!  
 What do you know might come  
 Into your life to wreck your joy,  
 To devastate your home?  
 Little you think your daughter  
 Runs risk of vice and blame.  
 Little you think your growing boy  
 Will cause some woman shame.



You fathers who sit and lord it,  
Now that your oats are sown,  
Can a hundred women number  
The harlots you have known?  
As you kiss your little baby,  
And you scold your hopeful wife,  
Do you ever look back and ponder,  
At your deceitful life?

Do you remember your twenties?  
And likewise your thirties, too?  
And have you changed your ways, I ask?  
Is anyone on to you?  
Is your name still known in the "district?"  
Do you maintain a flat?  
Have you a child lost somewhere,  
That you would call a brat?

Think of these human beings,  
Whimpering in their woe.  
Of course you can't correct them,  
This you surely know.  
But you can watch your daughter  
And you can teach your son,  
Not to ruin a maiden,  
Like you perhaps have done.

Never to tell a woman,  
A lie that will break her heart,  
And never to gloat on cunning ways,  
Or play a dastard's part.  
Teach the deeds of the Master,  
Not some infernal creed.  
The world wants human action,  
Tenets it does not need.

Then you, you polished plutocrats,  
Wild on business bent,  
Pay an honest wage to your workers,  
To show your sure intent.

It will help a lot in doing  
The things you claim should be  
Done—for our social evil,  
Done—for humanity.

And when you sit on juries,  
And see some cringing crook,  
Just close your eyes a moment,  
And take an inward look.  
And then make up your sober mind  
To do as you think is right,  
I'm sure you'll see your duty  
In a very lurid light.

How many of you are landlords  
To Pansy, or Rosie, or Belle?  
How many souls in your houses  
Carboliced into hell?  
Don't you always of a Sunday,  
Go to church and pray?  
When you know your wantoned tenants,  
Are roping all the day?

How many of you own tenements,  
Reeking and rotten, too,  
Where your agent drives like a slaver,  
Collecting the rent for you?  
Where childish fingers earn a dime;  
For all of a half a day's toil—  
And childish bodies, bend and break,  
Beneath the midnight oil.

Each city has its tenderloin,  
Each town its house of shame,  
And you and I, and all the world  
Contribute to the blame.

*The thing to do is obvious,  
Our task is clearly plain.  
Rightly teach the growing child,  
And we ourselves abstain.*

*—From Songs of the Underworld.*

## NO ONE HAD TOLD HER

SHE was just in the bloom of life's morning;  
She was happy, and free, and fair;  
And a glance in her bright eyes would tell you  
Of nothing but innocence there.

She was waiting for someone to tell her,  
As she stood with reluctant feet,  
On the banks of the wonderful river  
Where childhood and womanhood meet.

She waited, but still no one told her  
The secret of life so sublime;  
And she held not the safeguard of knowledge  
In life's beautiful morning time.

The flower so sweetly unfolded  
Was crushed by a rough hand one day,  
And the jewel, so sacred, so precious,  
Was stolen and taken away.—*Selected.*

---

## THE WORN OUT WOMAN

AT last I'm a worn out woman;  
I have drank my fill of life.  
I've had my share and more to spare,  
I am nobody's wife.

I want a home and flowers and babies;  
I want to believe I am good.  
I crave a name without a shame,  
To live as I know I should.

I know I cannot have it;  
I'm not kidding myself I can.  
I've paid the price and wedded vice;  
I'd tarnish—a regular man.



I'd love to go home for my finish;  
 Home where the skies are blue,  
 And there in bliss, feel a truthful kiss  
 From lips I knew were true.

\*   \*   \*   \*   \*

But I am only a worn out woman,  
 I must live *just* the same,  
 Drink the gall, and sate you all,  
 'Till the pitiless end of the game.  
—Clem Yore.

### THE HARLOT AND THE NUN

**T**WO figures lay in the morgue,  
 Dragged from the river deep:  
 A harlot was one, the other a nun,  
 Wrapped in endless sleep,  
 With a cake of ice at their shoulders,  
 And nobody there to weep.

The features were much distorted,  
 Only the clothes could name,  
 Which was the nun, and the other one  
 The woman lost to shame;  
 But the clothes were taken away,  
 When the coroner's deputy came.

And somehow their garments were mixed,  
 And thus when identified,  
 The fallen one became the nun,  
 And she was sanctified;  
 And the holy sister was buried alone  
 As though her shame to hide.

The woman of shame lies honored,  
 In Calvary's holy ground,  
 While Sister Celeste always will rest  
 'Till the very last trumpets sound,  
 As nineteen hundred and eight,  
 In a city's nameless mound.

So only the Master knows them  
 From the records of the mind;  
 "Judge not," He said, "the quick nor dead,  
 Lest ye be judged in kind:"  
 For woman's woes are many,  
 And the human eyes are blind.  
 —Clem Yore.

---

### DOWN AT THE CORNER

VIRGINIA was airy, a fair little fairy,  
 Born of the best of blood;  
 Her mother was proud, and she allowed  
 Virgie to do as she would;  
 And it was not writ, she thought a bit  
 Of what her child might learn  
 In running about, when she was out,  
 Where the street lamps dimly burn.

*Down at the corner, the poisonous corner  
 Where children love to go;  
 This is the spot, the red hot spot,  
 Where Satan's tapers glow;  
 This is the place, the luring place,  
 Primer of vice and woe.*

Virginia is old and it is told,  
 E'en to this late day,  
 When she went bad, citily bad,  
 Her mother pined away.  
 Nobody knows of Virgie's woes,  
 And no one seems to care;  
 But that old spot, that crimson spot,  
 Still lures the children there.

*Down at the corner, the poisonous corner,  
 Where the children love to go;  
 This is the spot, the red hot spot,  
 Where Satan's tapers glow;  
 This is the place, the luring place,  
 Primer of vice and woe.*

—From *Songs of the Underworld*.

## SONG OF THE LAYETTE

I LINGER over this snowy pile  
Of dainty muslin, linen and lace,  
Imagining all the while  
How they will look round a baby face.

Tiniest garments of fabric fine,  
Royal with costly embroidery,  
Fill my heart with a spell divine,  
Only the earnest of that to be.

All the glory of motherhood  
Has already enriched my soul,  
Stirred my pulse and warmed my blood  
Even before I have reached the goal.  
—*Ruth G. I. Havens.*

---

## WHERE DID THE BABY COME FROM?

WHERE did you come from, baby dear?  
Out of the everywhere into here.

Where did you get the eyes so blue?  
Out of the sky, as I came through.

Where did you get that little tear?  
I found it waiting when I got here.

What makes your forehead so smooth and high?  
A soft hand stroked it as I went by.

What makes your cheek like a warm, white rose?  
I saw something better than anyone knows.

Whence that three-cornered smile of bliss?  
Three angels gave me at once a kiss.

Where did you get this pretty ear?  
God spoke, and it came out to hear.



Where did you get those arms and hands?  
Love made itself into hooks and bands.

Feet, whence did you come, you darling things?  
From the same box as the cherub's wings.

How did they all come just to be you?  
God thought of *me*, and so I grew.

But, how did you come to us, you dear?  
God thought about *you*, and so I am here.

—George Macdonald.

---

### A WOMAN'S ANSWER

**D**O you know you have asked for the costliest  
thing

Ever made by the hand above,  
A woman's heart and a woman's life  
And a woman's wonderful love?

Do you know you have asked for this priceless thing,  
As a child might ask for a toy,  
Demanding what others have died to win;  
With the reckless dash of a boy?

You have written my lesson of duty out,  
Man-like you have questioned me;  
Now stand at the bar of my woman's soul  
Until I shall question thee.

You require that your mutton shall always be hot,  
Your socks and your shirts shall be whole;  
I require your heart to be true as God's stars  
And as pure as heaven your soul.

You require a cook for your mutton and beef;  
I require a far better thing.  
A seamstress you're wanting for stocking and shirts;  
I look for a man and a king.

A king for a beautiful realm called home,  
 And a man that the Maker, God,  
 Shall look upon as He did the first  
 And say, "It is very good."

I am fair and young, but the rose will fade  
 From my soft young cheek some day.  
 Will you love me then 'mid the falling leaves,  
 As you did 'mid the bloom of May?

Is your heart an ocean so strong and deep  
 I may launch my all on its tide?  
 A loving woman finds heaven or hell  
 On the day she is made a bride.

I require all things that are grand and true,  
 All things that a man should be;  
 If you give all this, I will stake my life  
 To be all you demand of me.

If you cannot do this, a laundress and cook  
 You can hire with little to pay;  
 But a woman's heart and a woman's life  
 Are not to be won that way.

—*Anonymous.*

---

### C. L. M.

**I**N the dark womb where I began  
 My mother's life made me a man.  
 Through all the months of human birth  
 Her beauty fed my common earth.  
 I cannot see, nor breathe, nor stir,  
 But through the death of some of her.

Down in the darkness of the grave  
 She cannot see the life she gave.  
 For all her love, she cannot tell  
 Whether I use it ill or well,  
 Nor knock at dusty doors to find  
 Her beauty dusty in the mind.

If the grave's gates could be undone,  
 She would not know her little son,  
 I am so grown. If we should meet  
 She would pass by me in the street,  
 Unless my soul's face let her see  
 My sense of what she did for me.

What have I done to keep in mind  
 My debt to her and womankind?  
 What woman's happier life repays  
 Her for those months of wretched days?  
 For all my mouthless body leeches  
 Ere Birth's releasing hell was reached?

What have I done, or tried, or said  
 In thanks to that dear woman dead?  
 Men triumph over women still,  
 Men trample women's rights at will,  
 And man's lust roves the world untamed.

\* \* \* \* \*

O grave, keep shut lest I be shamed.

—*John Masefield.*

### WHAT OF THE PRODIGAL GIRL?

**W**E all have a heart for the prodigal boy  
 Who was caught in sin's mad whirl,  
 And we welcome him back with songs of joy;  
 But what of the prodigal girl?

For the prodigal boy there's an open door,  
 And a father's bounteous fare;  
 And tho he is wretched, sick and poor,  
 He is sure of a welcome there.

But what of the girl who has gone astray?  
 Who has lost in the battle of sin?  
 Say, do we forgive in the same sweet way,  
 We've always forgiven him?



Does, the door stand ajar, as if to say,  
 Come, enter, you need not fear?  
 I've been open thus since you went away,  
 Now close to the second year.

Or do we with hand of hellish pride,  
 Close and bolt the door,  
 And swear, "While heaven and earth abide  
 She will enter here no more?"

Oh Christ! It seems we have never learned  
 The lesson taught in the sand,  
 For even yet the woman is spurned  
 And stoned in a Christian land.

Down into the slough we hurl her back,  
 Then turn around with a smile,  
 And welcome the boy from the sinful track,  
 Tho' he may have been more vile.—*Selected.*

---

### A MOTHER TO A SON

"**T**HROUGH long and shattering pain I gave  
 you birth;  
 It would have been far easier to have died,  
 But you, my baby, drew me back to life  
 By love and joy and pride."

"And when God called on me to lay aside  
 My dreams for you and give His cause my boy,  
 I sent you out to fight—perhaps to die—  
 With pride and love and joy."

"You have not died—you have not even fought—  
 Today I suffer more than all the pains  
 Your being cost. My pride, my joy, are gone—  
 Nothing but love remains."

"For all the service that you might have given,  
 And all the honour that you might have won  
 You squandered for a harlot's poisoned kiss—  
 My son, Oh God! my son!"

—*Amelia J. Barr.*

## SYPHILIS

I KNEW a yeoman, who for thirst of gain,  
To the great city drove from Devon's plain,  
His numerous lowing herd. His herds he sold,  
And his deep leathern pocket bagged with gold.  
Drawn by a fraudulent nymph, he gazed, he sighed;  
Unmindful of his home and distant bride,  
She leads the willing victim to his doom  
Through winding alleys to her cobweb room;  
Thence through the streets he reels from post to post.  
The vagrant wretch the assembled watchmen spies,  
He waves his hanger, and their poles defies.  
Deep in the roundhouse pent all night he snores,  
The next morning vain his fate deplores.  
Ah! hapless swain! unused to pains and ills,  
Canst thou forego roast beef for nauseous pills?  
How wilt thou lift to heaven thy eyes and hands,  
When the long scroll the surgeon's fees demands?  
Or else (Ye gods avert that worst disgrace)  
Thy ruined nose falls level with thy face;  
Then shall thy wife thy loathsome kiss disdain,  
And wholesome neighbors from thy mug refrain.

—John Gay.

## FENCE OR AMBULANCE

'Twas a dangerous cliff, as they freely confessed.  
Though to walk near its crest was so pleasant;  
But over its terrible edge there had slipped  
A duke, and full many a peasant;  
So the people said something would have to be done  
But their projects did not at all tally.  
Some said, "Put a fence 'round the edge of the cliff,"  
Some, "An ambulance down in the valley."

But the cry for the ambulance carried the day  
For it spread through the neighboring city;  
A fence may be useful or not, it is true,  
But each heart became brimful of pity

For those who slipped over that dangerous cliff,  
And the dwellers in highway and alley  
Gave pounds or gave pence, not to put up a fence  
But an ambulance down in the valley.

"For the cliff is all right if you're careful," they said,  
"And if folks ever slip and are dropping,  
It isn't the slipping that hurts them so much  
As the shock down below when they're stopping."  
So day after day as those mishaps occurred,  
Quick forth would these rescuers sally,  
To pick up the victims who fell off the cliff  
With the ambulance down in the valley.

Then an old sage remarked, "It's a marvel to  
That people give far more attention  
To repairing results than to stopping the cause,  
When they'd much better aim at prevention."  
"Let us stop at its source all this mischief," cried he,  
"Come, neighbors and friends, let us rally;  
If the cliff we will fence we might almost dispense  
With the ambulance down in the valley."

"Oh, he's a fanatic," the other rejoined,  
"Dispense with the ambulance? Never!  
He'd dispense with all charities, too, if he could.  
No, no! We'll support them forever!  
Aren't we picking up folk just as fast as they fall?  
And shall this man dictate to us? Shall he?  
Why should people of sense stop to put up a fence  
While the ambulance works in the valley?"

But sensible few, who are practical too,  
Will not bear with such nonsense much longer;  
They believe that prevention is better than cure,  
And their party will soon be the stronger.  
Encourage them, then, with your purse, voice and pen,  
(And while other philanthropists dally)  
They will scorn all pretense and put a stout fence  
On the cliff that hangs over the valley.



Better guide well the young than reclaim them when old,  
For the voice of true wisdom is calling;  
To rescue the fallen is good, but 'tis best  
To prevent other people from falling;  
Better close up the source of temptation and crime  
Than deliver from dungeon or galley;  
Better put a strong fence 'round the top of the cliff,  
Than an ambulance down in the valley.

—*Selected.*

## GLOSSARY

- Abortifacient** (abor-tefa'shunt). A medicine causing abortion.
- Abortion** (abor-shun). Premature expulsion of the products of pregnancy, in the first 3 months. (From 3 to 6 months generally called "miscarriage"; and 6 to 9 months "premature labor.")
- Abortionist** (abor'shun-ist). A person who makes a business of inducing criminal abortions.
- Abstinence** (ab'stinence). Voluntary privation in diet, etc. As used here refers to sexual intercourse.
- Abulia** (ah-bu'leah). Absent or defective will-power.
- Acrochronism** (akrok-ro-nizm). The belief that the time in which we live is better than in bygone ages.
- Adolescent** (ad'o-les'zent). Growing from childhood to adult life.
- Aesthetics** (See esthetics).
- Afterbirth** (af'ter-berth). The structure, consisting of the placenta and coverings, cast from the womb after birth of the child.
- After-Pain** (af'ter-pane). Pain following child-birth from contraction of the womb.
- Altruism** (al'troo-izm). 'Regard for others, both natural and moral; opposed to egoism (selfishness).
- Ameba** (ame'bah). Small animalcules, these jelly-like specks can only be seen with the microscope. Some are found in the body and cause disease, but the one here referred to comes from stagnant ponds.
- Amenorrhea** (amenorrhe'ah). Absence of the monthly "periods."
- Anathema** (a-nath'ema). A ban pronounced with solemnity by religious authority, and accompanied by excommunication. Hence: Denunciation of anything as accursed.
- Anemia** (ane'me-ah). A diseased state of the blood, the amount of which may be less than in health; or the quantity may be correct, but the quality not good. It is generally evidenced by paleness of the skin, loss of energy, palpitation of the heart, etc.
- Animalcule** (an-imal'kul). A microscopic animal organism.
- Anteflexion** (ante-flek'shun). A bending forward of the womb.
- Anteversion** (ante-ver'zhun). A turning forward of the womb.
- Antisepsis** (ante-sep'sis). The use of chemical substances which are capable of destroying disease germs.
- Antiseptic** (an-te-sep'tik). A substance destructive to poisonous germs. Some of the chief ones are alcohol, boric acid, carbolic acid, corrosive sublimate, common salt, charcoal, tannic acid, sugar and vinegar.
- Anus** (a'nus). The outlet of the lower bowel onto the surface of skin.
- Aortic** (a-ort'ik). Belonging or pertaining to the aorta. This is the largest blood vessel in the body, and leaving the left side of heart, brings red blood to the entire body.

- Apoplexy** (ap'o-plec-se). Bursting of a blood vessel in the brain. This may cause immediate or speedy death, or in case of recovery, the person is paralyzed more or less, as a rule one-half of body. The first seizure is generally followed later on (maybe years later) by one or more, finally ending in death.
- Appendages, Uterine** (appen'dages u'ter-in). The Fallopian tubes, and the ovaries.
- Arthritis** (ar-thri'tiz). Inflammation of a joint. (Inflammation of the lining only is called "synovitis.")
- Asceticism** (ascet-izizm). The belief that only those who mortify themselves in this world, by fasting and self-denial will get to Heaven.
- Asexual** (ah-seks'u-al). Without sex; non-sexual.
- Asexualization** (ah-seks-ual-iz-a'shun). Removal of the testicle or of the ovary, in the male and female respectively.
- Aspermia** (ah-sper'me-ah). Lack of secretion of semen.
- Atavism** (at'av-izm). Inheritance of characteristics from remote ancestors.
- Atony** (at'on-e). Lack of normal strength, i. e., debility.
- Atrophied** (at'ro-fed). Shrunken.
- Atrophy** (atro-fee). A shrinking or wasting of an organ or part. Like the opposite condition (hypertrophy) it may be due to fewer of the elements composing the part, or they may be smaller.
- Autism** (aw'tizm). A mental condition marked by morbid day dreaming.
- Autoerotism** (aw'to-e-rot'ism). Sexual instinct gratified without another person.
- Automatic** (au'to-mat'ic). Involuntary, or mechanical.
- Autopsy** (aw'top-see). The examination of a body, generally to determine the cause of death.
- Azoospermia** (assoh-spur-meah). Absence of the vital male animalcules (spermatozoa). Sexual relations are possible, attended by ejaculation, but pregnancy will not follow. In most cases the result of gonorrhea.
- Bagnio** (ban'yo). A house of prostitution.
- Balanitis** (bal-an-i'tis). Inflammation of the free end (or glans) penis.
- Barren** (bar'en). Sterile; unfruitful incapable of producing offspring.
- Biology** (bi-ol'o-ji). The science of living things, and of their structure and life.
- Brothel** (broth'el). A house of ill-fame.
- Bulbous** (bul'buz). Structures having a swollen end, usually applied to the cut ends of nerves.
- Cadet** (ka-det'). A slang term used to denote males who seduce young women, then live off their earnings.
- Calculus** (kalk'yu-lus). Stone-like bodies formed in various organs, very common sites are the kidney, urinary and gall-bladder. Small at first, if not passed spontaneously or removed by surgery, they keep on growing, often reaching incredible sizes, a pound and more.



**Cancer** (kans-er). This name was given long before Christ, on account of the way in which these deadly tumors send out masses somewhat resembling the limbs of a crab.

**Canon** (kan'non). A law, rule, or standard, for instance of behavior.

**Capillary** (kap'il-a-re). The smallest blood vessels joining the arteries to the veins. (Capillus in Latin means "a hair," so this gives some idea of the small dimensions.)

**Castration** (kas-tra'shun). Removal of the testicles. (In the female removal of the egg-sacs is called "spaying.")

**Catamenia** (kat-ah-me'ne-ah). The monthly uterine discharge; or the "periods."

**Cautery** (kaw'ter-e). A substance or instrument for burning away a part.

**Celibacy** (sel'i-ba-sy). The state of single life, especially one bound by vows not to marry.

**Cellular Tissue** (sel'u-lar). A loose, spongy tissue which surrounds the muscles and organs of the body, filling the space between them.

**Cerebrum** (ser'e-brum). The upper portion of the brain, forming the majority of that organ.

**Cervix** (ser'viks). A neck-like part of the body, here used for the womb.

**Chancre** (shang'ker). The sore or ulcer which marks the beginning of syphilis.

**Chancroid** (shang-kroid). This means "like a chancre," or the beginning of syphilis, but this "soft" sore once healed does not cause any further trouble.

**Chlorosis** (klo-ro'sis). The disease in young women mostly, so-called from the green color of the skin, or "green sickness."

**Chorea** (kore'ah). Uncontrollable twitchings of the muscles. Generally called "St. Vitus' dance."

**Cilia** (sil'yah). The eyelashes or similar hair-like processes. Used here to mean those on the inner lining of the egg—or Fallopian tubes.

**Climacteric** (klimak'ter-ik). Used here to mean the time at which the "monthly periods" stop.

**Clitoris** (klit'o-riz). The organ in the female corresponding to the penis in the other sex. Small, and located at upper angle of outer genitals.

**Cognate** (kog'nate). Things or subjects of a like or similar nature, as relations or families.

**Cohabitation** (ko-habit-a'shun). Has the same meaning as Coitus.

**Coitus** (koe-e-tuz). Sexual intercourse or connection.

**Coitus Incompletus** (koe'e'tuz in-complee-tuz). Interruption of the sexual act by "withdrawal" of the male, before emission of the seed.

**Coitus interruptus**, the same.

**Coitus prolongatus**, sexual acts which are kept up for much longer than the usual time, by an effort of will on part of the man.

**Colostrum** (kolos'trum). The first milk from the breast after childbirth. It is thicker than usual and full of small drops of fat.

**Complement-fixation test**, used to detect gonorrhea.

- Conception** (kon-sep'shun). Start of a new life or fecundation, by the male element coming in contact with the egg of female.
- Concubitu** (kon-ku'bit-you).
- Concubitus** (kon-ku'bit-us). Same as coition and copulation.
- Concupiscence** (kon-ku'pis-enz). Sexual desire.
- Confinement** (kon-fin'ment). The time of childbirth.
- Congenital** (kon-jen'it-al). A condition or state existing from birth.
- Congestion** (kon-jes'chun). Excess of blood in an organ or part.
- Conjugal** (kon'ju-gal). This term applied to the married state, really means "yoked together."
- Connubial** (kon-nu'bi-al). Same as conjugal.
- Consanguineous** (con'san-gwin'e-us). Persons related by birth.
- Consanguinity** (kon-san-gwin'it-ee). Blood-relationship. State of descent from same ancestor.
- Constipation** (kon-stip-a'shun). A sluggish condition of the bowels, usually meaning there is not a passage at least daily (or "costiveness").
- Continence** (kon'tin-ens). Self-restraint, particularly as regards sexual indulgence.
- Contraception** (kon-trah-sep'shun). To prevent conception.
- Contraceptives** (kon-trah-sep'tiv). Drugs or other measures made use of to prevent conception.
- Copulation** (kop-u-la'shun). Sexual intercourse or congress; coition; coitus.
- Cord, Umbilical** (cord, umbil'ical). The navel-string, attaching child to afterbirth. The means by which blood is supplied to child before birth.
- Corpora cavernosa** (korpo'rah kahverno-sah). Two of the three cylinders forming the male penis. They are much larger than the corpus spongiosum, which lies below and between them.
- Corpora lutea** (korpo-rah lew-te-ah). "Yellow bodies," the scars left in the egg-sacs (ovaries). Those after menstruation last about six months, after childbirth for several months longer.
- Corpuscle** (kor'pus-l). A very small body or cell. Usually applied to those found in blood; the most important being the red which give the characteristic color; and the white, only 1 of these to several hundred red.
- Courtesan** (kur'te-zan). A prostitute.
- Cowper's glands** (kowper's glahnds). Two small masses connected with the urinary channel of the male.
- Cryptorchid** (krip-tor'kid). A male whose testicles have not descended into the scrotum, and are retained in abdomen.
- Cytoplasm** (sighto-plazm). The bulk of the material composing the minute masses (cells) of which animals and plants are built. However, the Karyoplasm is more important.
- Dalliance** (dal'li-anz). The act of fondling; lover's caresses.
- Decidua** (de-sid'u-ah). The bag enclosing the child in the womb. The "caul," or "veil."
- Defecation** (def-e-ka'shun). The act of having a movement of the bowels.



- Defloration** (def-lo-ra'shun). The act of losing virginity, as distinguished from rape in which violence is used.
- Demi-mondaine**, an inhabitant of the "half-world." Originally used to designate women not living with their husbands, but now meaning "kept women" or others of shady reputation, though not prostitutes.
- Demi-monde** (dah'mi-mond). French words meaning "half-world."
- Dentition** (denti'shun). The process of cutting the teeth.
- Detumescence** (dee'tu-mes-enz). Subsidence of anything swollen, generally used for the sexual organs after intercourse.
- Dipsomania** (dipso-ma'ne-ah). Uncontrollable desire or craze for alcohol.
- Douche** (doosh). A stream of water directed into a cavity, or against a part of the body. Usually applied to flushing of the birth-canal in the female.
- Dropsy** (drop'se). Collection of fluid in the limbs and cavities of the body. Generally caused by disease of the heart, kidneys or liver.
- Dysmenorrhea** (dis-menor-e'ah). Painful and difficult "monthly periods."
- Dyspareunia** (dis-par-ru'ne-ah). Sexual intercourse attended by pain.
- Dystocia** (dis-to'ke-ah). Difficult childbirth.
- Eclampsia** (e-klamp-se-ah). The fits or spasms which often come on during pregnancy, childbirth, or after the latter.
- Effete** (ef-feet'). Worn out, generally from age.
- Ego-ideal** (aygo-eyedeal). Since ego means "I" and ideal "perfection," the combination characterizes persons who think themselves perfect; having a "swelled head" in other words.
- Ejaculation** (e-jak-u-la'shun). A sudden expulsion, for example the seminal fluid of the male during intercourse.
- Embryo** (m-bree'oh). Applied to the child during the first four months after it begins to grow in the womb; after that it is called "fetus."
- Endometrium** (ahndo-me-tri-um). The lining of the womb.
- Endometritis** (ahndo-me-tri-tis). Inflammation of the lining of the womb.
- Endopsychic** (ndo-sy-kik). The "mind within," that is to say of a given person.
- Epididymis** (epee-did'ymis). The cap of the testicle, attached to the posterior border at the upper end.
- Epididymitis** (epee-didymi'tis). Inflammation of the cap of the testicle.
- Epilepsy** (epi'lep-se). "Fits," or convulsions, with frothing at mouth, and unconsciousness.
- Epispadias** (epee-spada-eas). A deformed penis in which part or all of the roof of the urinary channel is absent.
- Epithelium** (epi-thele-um). The little plates, as it were, which fitted together form the outer layer of the skin, and of the lining of the body.
- Erection** (eerek-shun). An organ or part of the body which becomes firm and hard by the blood becoming dammed up in it. Here applied to the penis and clitoris, in the male and female respectively.



- Erethism** (ayre'thizm). An excessive amount of nervous irritability.
- Erogenous** (see "Erotogenic").
- Erotic** (e-rot'ik). From the Greek name of Cupid, hence pertaining to—sensual—love.
- Eroticism** (er-ot'is-izm). Tendency to erotomania, or a craze for sexual intercourse; as dipsomania is for alcohol.
- Erotogenic** (e-rot-o-jen'ik). Producing erotic sensations, hence—
- Erotogenic Zones**, areas which on being stimulated give rise to such feelings.
- Esoteric** (e-soter'ik). Arising within the organism, as distinguished from "exoteric," arising without.
- Esthetics** (es-thet'iks). The power or mental faculty for appreciation of the beautiful.
- Ethic, Ethical** (eth'ik, eth'ik-al). In accordance with those rules governing conduct (or ethics).
- Etiology** (e-te-ol'o-je). That part of the science of medicine which treats of the causes of disease.
- Eugenics** (u-jen'iks). That science which treats of the future improvement of the human race.
- Eunuch** (u'nuk). A boy or man, deprived of the testicles only; or of all external genitals.
- Exacerbate** (egz-as'er-bait). To grow more violent; as an attack of illness.
- Exhibitionism** (x-hibish-un-ism). A type of insanity in the male, in which the subject exposes his sexual organs.
- Extra-marital**, outside the married state, as when a man contracts venereal disease.
- Fallopian tube** (Fahlo-pean). The channel by which the eggs come down from the egg-sacs to the womb. (Named after the Italian who discovered them nearly 400 years ago.)
- Feces** (fe'sez). The material discharged from the bowels.
- Fecund** (fek'und). Fruitful or prolific.
- Fertilization** (fer-til-iz-a'shun). Impregnation by the male seed coming in contact with the female egg.
- Feticide** (fe'ti-sid). The destruction of the child in the womb.
- Fetish** (fet-ysh). Idols worshipped by savage tribes, mostly in Africa. It may be a rock, or other inanimate object, or living things, trees, birds, etc.
- Fetichism** (fet-ysh-ym). A form of sexual aberration in males, in which shoes, gloves or other objects of female clothing are used to excite sexual associations, generally with the aid of masturbation.
- Fetus** (fe'tus). The child after the fourth month of pregnancy. (Before that time called "the embryo.")
- Fibroid** (fy-broyd). Hard tumors, like gristle. They may be found in many parts of body, either in men or women, but here refer to those in womb.
- "Filles de joie"** (fee day shwaw). "Daughters of joy," the French name for prostitute.
- Fimbriated** (fim-bree-a-ted). This means "fringed," and is applied to the border of the egg or Fallopian tubes, at their upper end. While meant to guide the egg into the womb, sometimes they fail and the egg falls into the

abdomen, so the child develops among the bowels instead of in the womb.

**Fistula** (fystu-lah). An unnatural passage in the body, caused by disease, generally an abscess. It may be inside and between the stomach and bowels, or bowels and bladder, etc., but often opens from the skin into the inside, a common place being at the lower end of bowels.

**Flatus** (fla'tus). Gas or "wind" in the bowels.

**Fluor albus** (flew-ohr ahl-buz). Same as leucorrhea, or "the whites."

**Function** (funk'shun). The work of an organ which can be performed only by that organ, and is necessary to the life or well-being of the individual.

**Gastralgia** (gastral-jeah). "Stomach ache," pain in the stomach, without inflammation. (When there is inflammation it is termed "gastritis").

**Generative Organs** (jen'er-a-tiv or'gans). Those organs in the male and female by means of which a new being is created.

**Genitalia** (jen-it-a'le-ah). The sexual reproductive organs.

**Gleet** (glete). The chronic stage of gonorrhea.

**Gonad** (gho-nad). The portions of the body which furnish the matter from which the child starts. The testicles and the egg-sac (ovaries) in the male and female respectively.

**Gonococcus** (gon-o-kok'us). The minute vegetable germ which causes gonorrhea.

**Gonorrhea** (gon-or-e'ah). The venereal disease which is characterized by a discharge of pus from the urinary passages.

**Graafian follicle** (grayph-ean fol-li-kl). Little bags which form on the outer surface of the egg-sacs, and each enclose an egg. They burst finally and set the egg free to travel down to womb, and the scars left are called the "corpora lutea." (Also called Graafian vesicles).

**Groin** (groin). The crease between the lower abdomen and the thigh.

**Guerdon** (ger-dun). A reward or recompense.

**Gumma** (gum'ah). Masses of soft material formed in many parts of the body, during the third stage of syphilis.

**Gynecologist** (jine-kol-ojist). A doctor who confines his practice to the diseases peculiar to women, and who is therefore especially skilled in their treatment.

**Habitation** (habit-you-ashun). Becoming used to or accustomed to a condition or occurrence.

**Hedonism** (hedo-nism). Sensuality, pleasure-seeking the chief aim of the person.

**Hemorrhoid** (hem'or-oid). A "pile" or vascular tumor of the rectal mucous membrane.

**Hernia** (her'ne-ah). The escape of a part, generally the bowel from its usual place. Same as "rupture."

**Herpes** (hur-pease). A disease of the skin with formation of blisters. The everyday "shingles" is a good example.

**Heterosexual** (het-ero-seks-shual). Belonging to or connected with the other sex.

**Holophilic** (holo-feelik). "Love of the whole," that is, of humanity.

**Homologous** (homol-ogus). Parts or organs having the same appearance, but not necessarily for the same use. For example, the front limbs of quadrupeds and birds are homologous—yet in one case used for walking, in the last for flying.

**Homosexual** (homo-seks-shual). Belonging to or connected with the same sex.

**Hors d'oeuvre** (or-davre). French for "side-dishes."

**Hybrid** (hi'brid). Having parents of different species, as a mulatto, a mule, etc.

**Hydrocele** (hi'dro-sel). A collection of fluid, especially in the male scrotum (or covering of the testicles).

**Hygiene** (hi'jeen). The science of health, and how to preserve it.

**Hygienic** (hi-jeen'ik). Pertaining to health.

**Hymen** (hy'men). "Maiden-head." The fold at the outer orifice of the birth canal in a virgin.

**Hyperesthesia** (hi-peres-theesya). An increase in the sensibility of the skin, or of some of the senses, sight, hearing, etc. Hence sexual hyperesthesia would be a marked increase of the sexual appetite.

**Hypertrophy** (hi-per-trofe). Increased size of an organ or part of body. It may be due to a larger number of the component parts, or each of these parts may be larger without increase in number.

**Hypochondriacal** (hypo-kondri-akal). Having the "blues." Unduly anxious as to one's health.

**Hypoesthesia** (hipo-esthee-sya). A decrease in the sensibility of

the skin or of the senses, sight, hearing, etc. (The opposite of hyperesthesia.)

**Hypophysis** (hipof-yziz). A mass hanging from the lower side of brain, and enclosed in a recess of the skull. While not much larger than a pea, it has great effect on growth, and when diseased in childhood, growth is not checked as usual at about 18 or 20 years, and the result is the individual becomes a giant.

**Hypospadias** (hipo-spad-iaz). A deformity of the penis in which the lower wall of the urinary channel (urethra) is partly or entirely lacking.

**Hysteria** (histe-reah). A disease found occasionally in men, but mostly in young women. The patients have no control over their acts or their feelings, and exaggerate all their real or imaginary ills. All possible diseases are counterfeited, they may claim to be blind, to be paralyzed to have "fits," fever, and so on.

**Iconoclast** (ikon'o-klast). An enemy of the worship of idols, and who destroys them.

**Idée fixe** (eeday-fiks). French words meaning a "fixed idea," a form of insanity.

**Impotence** (im'po-tens). A lack of power of any kind, but refers principally to lack of sexual power.

**Impotentia coeundi** (impoten-sheah koe-undy). Inability to have sexual intercourse.

**Impotentia generandi** (jen-erandy). Inability to have children.

**Impregnation** (im-preg-na'shun). The fecundation of the egg by male elements.



- Infanticide** (in-fan'tis-id). The murder of an infant. If done before birth (or criminal abortion) called "feticide."
- Inhibit** (inhib-it). To hold in check or stop altogether. Generally used to mean the influence exerted by the nerves on some function, say digestion.
- Inhibition** (inhibit-shun). The act of checking or stopping.
- Intercourse** (inter-korse). While this may mean association of nations or countries, it here refers to sexual unions.
- Intermenstrual** (in-ter-men'strual). Symptoms between the monthly "periods."
- Interstitial gland** (inter-stish-yul). As used here means taking the testicle or ovary from other persons or animals, and inserting them in the bodies of men or women.
- Intrauterine** (in-trah-u'ter-in). Anything within the womb, usually in central cavity.
- Iritis** (i-ry'tis). Inflammation of the iris, or colored part about pupil of eye.
- Jeunesse dorée** (junes-doray). Two French words meaning "gilded youth." Fashionable young men, necessarily of the wealthy class.
- Karyoplasm** (kareeoh-plazm). The vital or essential portion of the small particles (cells), of which many trillions go to make up our bodies. (Sometimes spelled "caryoplasm.")
- Katabolic nerves** (katah-bolik). Those which govern the wear and tear of our bodies.
- Labia majora** (lahbee-ah mag-orah). The "large lips," two folds of skin at the outer opening of the female genitals.
- Labia minora** (lahbee-ah meen-yorah). The "small lips," two smaller folds inside the "large lips."
- Laceration** (las-er-ashun). The act of tearing, or rending, and a wound so made.
- Lactation** (lak-ta'shun). The period of suckling or nursing.
- Lactiferous ducts** (lak-tif'er-us dukts). The tubes bringing milk from the breast to the nipple.
- Lesbian love** (las-beean). Unnatural intercourse between women, so called from the Island of Lesbos, in ancient Greece, where it was said to be very common. (Also called "sapphism" and "tribadism.")
- Leucorrhea** (lu-kor-e'ah). A whitish-yellow or green discharge from the birth canal or womb, "the whites."
- Liaison** (le'a'zon). An illicit intimacy between man and woman.
- Libidinous** (lib-id'in-us). Strong sexual desire. Lustful. Salacious.
- Libido** (lib-i'do). Sexual urge, craving or desire.
- Lochia** (lo'ke-ah). A discharge which follows childbirth, lasting about two weeks.
- Locomotor-ataxia** (a-tak-shea). A disease of the spinal marrow due to syphilis, and producing a staggering walk.
- Lying-in** (li'ing-in). The period which follows childbirth, during which the mother is confined to bed.

- Macrobiotic** (mak-robi-ot'ik). Long-lived.
- Mamma** (mam'ah). The breast.
- Mariages de convenance**. A marriage from interested motives (French).
- Masochism** (maz-o-kism). One form of sexual aberration, in which the subject requires cruel treatment before ability to have coition.
- Massage** (mas-ahzh'). Methodic pressure, friction, and kneading of the body, especially the muscles and joints.
- Masturbation** (masturba'shun). Production of the venereal orgasm by stimulating the genitalia mechanically.
- Matriarchate** (mat-ri-ar'kat). Descent reckoned only in the female line, the children all belonging to the clan of the mother.
- Meatus urinarius** (mee-ah-tus yourinar-ius). Two in number, the one usually meant is the outer aperture on surface of body of the urinary channel; the other is outlet of the bladder internally.
- Menopause** (me-no'paws). "Change of life," the time when the monthly "periods" stop.
- Menorrhagia** (men-or-a'je-ah). A profuse or excessive menstrual flow.
- Menses** (men'sez). The periodic flow from the womb, usually every 28 days; i. e., a lunar month.
- Menstruation** (men-strua'shun). The function peculiar to the female of producing the menstrual flow.
- Metabolism** (met-ab'o-lizm). Wear and tear of the body.
- Metamorphoses** (metamor'phoses). Changes of shape or structure, as of liver to fat, etc.
- Metro-peritonitis** (mee'troper-itioni-tis). Inflammation of the womb and of the thin covering.
- Metrorrhagia** (metrorrh'gia). A flow of blood from womb between the "periods."
- Micturition** (mik-tu-rish'un). The act of passing urine.
- Milt**. The seminal fluid of fishes.
- Miscarriage** (mis-kar'aj). The expulsion of the fetus between the third and the sixth months of pregnancy. (Before that time usually called "abortion," and later "premature labor.")
- Molecular** (mo-lek'u-lar). Belonging to the smallest portion of anything.
- Monandrous** (mohnan-druz). Same as monogamy, but usually said of plants.
- Monastic** (mo-nas'tik). From the Latin for a monk. Hence of or pertaining to life in a monastery.
- Mongrel** (mon'grel). Not of a pure breed, as mongrel dogs.
- Monogamy** (mo-no-gah'my);
- Monogamous**. Marriage with but one person; also applied to the mating of animals and birds, where as is often the case the pairing is for life.
- Mons Veneris** (monz vah-neris). The cushion of fat at the upper side of the external genitals in the female.
- Morbidity** (mor-bid-itee). The relation between disease and health in a given country or community, that is the sick-rate.
- Motivation** (moh-tee-vah-shun). The force or impulse behind a given act.

**Mucous** (mu-kus). Parts which make mucus (slime). On inside of body, and many connected with the digestive organs.

**Mucus** (mukus). The slime or watery fluid produced by such parts.

**Myositis** (mi-osi-tis). Inflammation of the muscles.

**Nephritis** (nefre-tiz). Inflammation of the kidney ("Bright's disease.")

**Nerve-centre**. The "switchboard" in the brain or the spinal marrow, where ingoing impulses are received, and shunted to outgoing ones.

**Neurasthenia** (nurasthe-nyah). Marked lessening or complete exhaustion of nerve force. It may be due to overwork and many other causes, but is here used to mean the effect of sexual excesses ("sexual neurasthenia").

**Neurosis** (nu-ro-ziz). A "functional" affection of the nervous system. That is to say, the use of the nerves is interfered with, though there is no change in their structure. A typical example is "writer's cramp." (When a disease alters the make-up of the parts involved, it is termed "organic.")

**Neurotic** (nurot-ik). A person affected with a neurosis.

**Neuter** (nu-ter). A person or being neither male nor female. (The "workers" among bees are neuters, because they have no sexual organs.)

**Nocturnal emissions** (noktur-nal emish-unz). Escape of the secretions of the sexual organs during sleep. While usually referring to the male "seed," in

the other sex, there may be a discharge from the vulvovaginal glands on each side of the outer opening.

**Nostalgia** (nostal-jeah). The melancholy state caused by the desire to return home or to the person's native land.

**Nubile** (new-bill). The age suitable for marriage, generally said of young women.

**Nucleus** (newklee-uz). The small spot within a cell, on which the special properties of the cell depend. (Composed of karyoplasm).

**Nuptial** (nup-shall). Related to or connected with weddings; nuptial ceremonies, nuptial rites, etc.

**Nymphæ** (nim-fay). The lesser lips (labia minora), so called because they were supposed to direct the stream of urine.

**Nymphomania** (nimfo-mania). A form of insanity in women, attended by excessive sexual desire. (A similar condition in men is termed "satyriasis.")

**Obscurantism** (obsku-rant-izm). The doctrine of the obscurants, who believe in "blocking the wheels of progress," of knowledge and learning.

**Omentum** (oman-toom). A sort of apron which hangs down inside the belly, from the stomach, and is in front of the bowels.

**Onanism** (onan-izm). Sexual congress in which—to prevent impregnation—the male organ is "withdrawn" before the seed is expelled.

**Oöphorectomy** (ofurek-tomee). Removal of one or both of the egg-sacs (ovaries).



- Ophthalmia** (offthal-mee-ah). Inflammation of the moist lining of the eyelids, and of its continuation on the eyeball. Applied here especially to that in new-born babes from gonorrhea in the mother's birth-canal.
- Orgasm** (urgazm). The end—or climax—of sexual intercourse, evidenced in the male by the discharge of "seed," and in the female by escape of the contents of the vulvovaginal glands.
- Orgiastic** (orgee-asteek). Of or related to orgies. These latter were common in ancient Greece and Rome, as part of the worship of the God of Drunkenness. Still used to mean a drunken carouse.
- Os** (awss). Latin for "bone," also for "mouth." The entrance to the womb is called os uteri (mouth of the womb).
- Ovaritis** (ovary-tiz). Inflammation of an egg-sac (ovary).
- Ovary** (ovah-ree). The egg-sacs which form the eggs (ova).
- Oviducts** (ovee-dux). The narrow channels by which the eggs come down from the egg-sacs to the womb. (Usually called Fallopian tubes.)
- Ovulation** (ovulay-shun). Process of formation and discharge of the eggs, at or about the same time as the monthly "periods."
- Ovule** (ov-ewl). An egg before impregnation by the male elements. (After such fertilization it is termed an "ovum.")
- Ovum** (oh-voom). The egg after fertilization by the male elements.
- Ozena** (ozee-nah). Severe nasal catarrh, in which ulcers form and the discharge is horribly ill-smelling. (Often due to syphilis.)
- Pantagamy** (pantah-ghamee). The practice formerly resorted to by the Oneida Community of New York State, and called by them "male continence." It consisted of prolongation of sexual intercourse much beyond the usual time by will-power of the male, and without discharge of the "seed" (semen).
- Paresis** (pahre-siz). Complete paralysis, due to syphilis.
- Paresthesia** (pahres-theez-ya). An unusual sensation, itching, burning, especially of the skin.
- Parturition** (partyou-rish-yun). The process of giving birth (that is child birth).
- Pathology** (pathol-ojee). That branch of medical knowledge which treats of diseases.
- Patriarchate** (paytri-arkate). Descent reckoned only in the male line, the children all belonging to the clan of the father. (Where reckoned in female line, called "matriarchate.")
- Pelvis** (pal-viz). "A basin," the bony ring formed by the hip-bones on each side and the backbone behind, surrounding some of the sexual organs in the male, and most of those in the female.
- Pelvic** (pal-vik). Connected with or belonging to the pelvis.
- Perineum** (payrinee-oom). A triangular portion between the lower bowel and the birth-canal, the base formed by the skin. (In the male it occupies a similar position, but is of much less importance.)

**Periodicity** (peeree-odis-itee).

Some phenomenon or function which returns at regular intervals. For example, the menses, every 28 days, as a rule, are periodic.

**Periphery** (payrif-eree). The outer edge or circumference of anything, say an organ of the body.

**Peristaltic action** (payristal-tik ak-shun). The contractions of the bowel, followed by dilatation, by which the food is forced along.

**Peritoneum** (payree-toneee-oom). The moist lining of the belly cavity, it also covers the stomach, liver, etc. Being moist, the contents of the belly slide past each other without damage.

**Peritonitis** (payreeto-nytiz). Inflammation of this lining.

**Pernicious anemia** (pernit-shus anee-mya). A very dangerous form of anemia, the cause is still unknown, and the majority of the affected persons die.

**Perversion** (payr-ver-shun). A change from the usual course. (Hence Sexual Perversion means some unnatural means of gratifying sexual desire—Sadism, Masochism, etc.)

**Phantasy** (fanta-see). Queer ideas, "drawing on the imagination."

**Phenomena** (feenom-eeenah). Events or appearances out of the ordinary. Birth of a child with two heads would be so called.

**Philosophic** (filos-offic). The conduct which a philosopher would be likely to follow, wise and cool, matter-of-fact.

**Phimosis** (fymo-siz). Foreskin (in either sex), so tight the

penis or clitoris, as the case may be, cannot be exposed.

**Phobia** (pho-beeah). A continuous fear or dread of some event or circumstance. Acrophobia, fear of high places; claustrophobia, of rooms and enclosures, and so on.

**Physical** (fizi-kal). Connected with or pertaining to physics, the department of knowledge which treats of the properties of matter. Also of or related to the human body—physical examination, examination of the body and its parts.

**Physiologic** (fizzeo-lojik). Of or belonging to physiology.

**Physiology** (fizzeol-ogee). The department of science, which deals with the body functions and uses.

**Placenta** (plass-entah). The "afterbirth," by which the child is nourished from the mother previous to birth. The name in Latin means a "flat cake," and this gives a good idea of the shape.

**Plethora** (pletho-rah). A condition with too much blood, causing headache, nosebleed, and a rosy countenance, among other things.

**Pollutions** (pollu-shuns). The ridiculous term sometimes applied to the escape of the "seed" during sleep. (There is nothing "polluting" about such occurrences.)

**Polyandry** (pohlee-ahndree). Marriage of a woman with more than one man, often all the brothers of a family.

**Polygamy** (pohleeg-ahmee). The state of having more than one



- wife (or mate) at a time.  
(Used for both men and animals.)
- Pornography** (pornog-rafee). The literature dealing with vile or obscene subjects.
- Post-natal** (naytal). Some event occurring after birth.
- Post-partum** (pahr-toom). Same meaning, hence—
- Post-partum hemorrhage** (hay-moraj). The bleeding after delivery of a woman.
- Potentia coeundi** (potenshe-ah ko-undy). Power or ability to have sexual intercourse.
- Potentia generandi** (jen-erandy). Power or ability to have children.
- Potentia senilis** (seny-liz). Old men who retain power or ability to have intercourse.
- Precocious** (preko-shuz). Unusually early development of some function, for instance the sexual. (In most instances, however, this is a sign of some disease, often of the brain.)
- Pregnant** (prayg-nant). Being with child, "in the family way."
- Premature Labor**. Childbirth before the usual time (280 days). Usually taken to mean in last two months, when child is capable of survival. Before that called "miscarriage" and if very early, "abortion."
- Prepuce** (prep-use). The foreskin of the penis (male), and clitoris (female).
- Preputial** (prepu-sheal). Of or belonging to the prepuce.
- Presenile** (pre-seenyle). Said of persons who while young or even in middle life, have all the characteristics of old age.
- Priapism** (pryap-izm). Said of the male penis, when erection continues for hours or days with pain.
- Primo Concubitu** (preemoh kon-kewbityou). The first sexual relation of the individual.
- Progeny** (proj-enee). The children or offspring.
- Prolapse** (proh-laps). A descent or falling down of an organ or part, refers here to the womb. (In Latin "prolapsus.")
- Promiscuity** (prohmeeskew-ee-tee). The condition supposed to have existed in the early ages of the world, in which there was no marriage and no family-life. The children followed the mother, as those of animals do to this day.
- Propagation** (propah-ghashun). The spread or diffusion of an idea, religion, etc. Often used to mean sexual intercourse.
- Prophylactic** (profeelak-tik). Methods used to prevent the spread of disease.
- Prophylaxis** (profeelaks-iz). The same, or rather the theory of such prevention.
- Prostate** (praws-tayt). A gland, shaped something like a chestnut which surrounds the lower end of bladder in the male.
- Prostatorrhea** (prawstat-orreeah). A discharge from the prostate gland.
- Prostitute** (prawstee-tewt). A woman who accepts money for the hire of her body, a harlot, a strumpet.
- Prurient** (prewree-ant). From the Latin for "itching," hence itching for forbidden knowledge, especially of the genitals and of sexual relations.
- Pseudo** (sudoh). When beginning a word means false or counterfeit. Hence—



- Pseudofrigid** (sudoh-freejid). A person masquerading as sexually cold.
- Psyche** (sy-kee). The mind, the soul.
- Psychic** (si-kik). Of or pertaining to the mind. Hence—
- Psychic-frigidity** (fri-jid-itee). Sexual coldness of mental origin.
- Psychologist** (sikolo-jist). A person well learned in psychology.
- Psychology** (sikol-oje). The department of knowledge which deals with the mind and its workings.
- Psychoneurosis** (sykonew-row-siz). A nervous disease either originating in the mind, or affecting it.
- Psychopathologic** (sykopatho-lo-jeek). The diseased states which set up mental disorders.
- Psychosexual** (syko-seksyual). The mind chiefly occupied with sexual matters.
- Psychosis** (syko-siz). A mental disturbance or disorder.
- Psychotic** (sykot-ik). Caused by or related to a psychosis.
- Puberty** (pewber-tee). The time of life when reproduction becomes possible, evidenced in the male by formation of the "seed," and in the female by beginning of the "monthly" periods."
- Puericulture** (pewairi-kulshur). Looking after women during pregnancy, so the children when born will be strong and healthy. (Also the training and care of children after birth.)
- Puerpera** (pewer-pahrah). A woman who has recently given birth to a child. Consequently
- Puerperal septicemia** (pewer-pah-ral septiseemyah). Blood poisoning after childbirth ("child-bed fever)."
- Puerperium** (pewerpah-rheum). The stay in bed after childbirth.
- Quickening** (kwik'en-ing). The first movements of the child in the womb felt by the mother.
- "Râle holes"** (ral-holz). Slang term for the baths at Hot Springs, Ark., as they are used to cure syphilis.
- Rape** (rayp). Sexual intercourse forcibly and against the will. Generally on females; sometimes by women on boys.
- Rectum** (rek-toom). The last portion of the bowels, which opens on the skin.
- Reflex** (ree-fleks). A "switch-board" in the brain or spinal marrow, by which impulses are shunted from one part of the body to another. For instance, heat increases the flow of perspiration, through the reflex from the skin to the sweat-glands, by way of the brain.
- Respiration** (respee'ra-shun). The process of breathing.
- Retching** (ret'shing). An effort at vomiting, in which either nothing at all is brought up, or only slime (mucus).
- Retroflexion** (ret-ro-flek'shun). A bending of the womb; (a further stage of retroversion).
- Retroversion** (ret-ro-ver'shun). The turning back of the womb, not so severe as retroflexion. (Turning forward is called "anteversion.")
- Roués** (roo'ay). "Men about town," "rounders," whose chief aim in life is sexual gratification.

**Rugæ** (rhoo-gay). A part of the body having folds or wrinkles.

**Rut** (rhut). Being "in heat." The extreme impulse to reproduction occurring at regular intervals, usually once a year, in horses, cattle, and other animals.

**Sadism** (sah-dizm). The form of mental aberration in which violent or cruel treatment of the partner arouses sexual desire.

**Salpingectomy** (salpin-jek'toh-me). Cutting out of part or all of an egg (or Fallopian) tube.

**Salpingitis** (salpin-ji'tiz). Inflammation of the Fallopian tubes.

**Sapphism** (saff-izm). Unnatural sexual relations between females. (Also called "tribadism," and "Lesbian love.")

**Satyriasis** (sahtee-ri-aziz). A form of insanity in men, in which they behave like satyrs.

**Satyrs** (sah'teers). In the fables long before Christ, were supposed to be part man and part goat; hence with the lewd conduct of these animals. In statuary generally making part of the court of the God of Drunkenness.

**Self-abuse** (see Masturbation).

**Semen** (seamen). The "seed" produced by the male, which acts on the "egg" of female, and gives rise in time to the child.

**Seminal Emissions.** Escape of the male "seed" at other times than sexual intercourse. (Usually during sleep.)

**Senile** (se'nial). An old, wornout condition of the body, or parts only. Generally in advanced life, but some diseases or conditions may bring it on comparatively young.

**Sensuality** (sensyu-al-itee). The mental state of individuals whose chief object is gratification of their appetites. Commonly used for sexual desires, but may imply excess in eating or drinking, love of finery, etc.

**Sepsis** (sep'siz). In other words "blood poisoning."

**Sexologist** (seks-ol-ojist). One having especial knowledge of sexology, and an authority on that subject.

**Sexology** (seks-ol-ojee). The topic which considers the sexes of mankind, but particularly their relations.

**Sexual** (seks-you-al). Connected with or pertaining to sex.

**Sexual anesthesia** (sekshu-al anesthee-sya). Anesthesia means loss of feeling or sensation; hence sexual anesthesia is an absence of sexual desire ("frigidity").

**Smegma** (smag-mah). A whitish, foul-smelling substance which accumulates about the external genitals of unclean individuals.

**Somatic** (sohma-tik). Belonging to the body, that is the framework (bones, muscles, etc.), as distinguished from the contained organs (liver, stomach, etc.)

**Spaying.** Removal of the egg-sacs. (In the male removal of the testicles is called "castration.")

**Sperm.** The "seed" or semen of the male.

**Spermatorrhea** (sper-mat-ore-ah). Escape of the male "seed" at other times than sexual intercourse. (To be distinguished from nocturnal emissions "wet dreams" during sleep.

**Spermatozoa** (sper-mato-zoah).

The actively-moving animalcules forming the male "seed." Of the many thousands discharged at one time, only one unites with the egg to form the child.

**Spirochæta pallida** (spyro-keta pah-lidaw). The "pale spiral," a very small animalcule which causes syphilis.

**Sterility** (stay-ril-itee). Unable to have children, barren.

**Sterilize** (stay-ril-ise). To free fabrics or instruments of disease germs. Usually by baking at a high heat for a long time.

**Stricture** (strix-your). A narrowing, or "drawing tight" (as the name implies), of a channel or passage. May involve any of these—bowels, throat, etc.—but here refers to narrowing of the urinary passage of the male.

**Subinvolution** (sub-in-volew-shun). As used here means the womb after childbirth does not return to its usual size, but remains much larger.

**Suppository** (sup-pozi-toree). Small, round, or conical masses, of wax, cocoa-butter, etc., containing medicine. These when inserted into the lower bowel or birth canal melt at body heat, and the contained drug flows gradually over the disease area.

**Syncope** (sinko-pee). Fainting or swooning.

**Synovitis** (sino-vytiz). Inflammation of the thin lining of the joints.

**Syphilis** (sifi-liz). A serious venereal disease; may be inherited, but is generally contracted in sexual relations. There are three stages, and while any

part of the body may be affected, naturally the skin eruptions are most noticeable.

**Tabu** (ta-boo). Houses, plots of ground, or objects, the approach to (or use of), being forbidden by the tabu laid on them by the king or by priests. The prohibition began in the South Sea Islands, but the word is now used everywhere. (Also spelled "taboo.")

**Tabus**. Plural of tabu.

**Tachycardia** (takeekar-deah). A heart which is beating much too rapidly.

**Tampon** (tahm-pun). Wads of various materials, cotton, gauze, etc., used to plug, cavities of the body. Refers here to the ones for birth-canal, they are tied with the string hanging out, so they can be removed in due time.

**Tedium Vitæ** (tee-deom fitay). Tired of life.

**Testicles** (test-ikulz). The organs of the male, usually two, which manufacture the "seed." (Also called "testes.")

**Tetanus** (teta-nuz). Latin for "lockjaw."

**Thymus** (thi-muz). A mass found in the neck and upper chest of children and young animals. In the child it begins to disappear at the age of 2, and in about ten years more is nearly all gone. (In calves makes part of the "sweet-breads.")

**Thyroid** (thi-royd). A large mass on each side of the windpipe at upper end, and joined by an isthmus across the front. "Goiter" is an enlargement of this mass.



- Torsion** (tor-shun). A turning or twist.
- Tribadism** (trib-ādizm). From the Greek for "rubbing," unnatural intercourse between women. (Also called "Lesbian love" and "sapphism.")
- Tumescence** (tewmes-zent). Swollen, enlarged. As used here refers to the genital organs of both sexes, preliminary to coition.
- "Twilight Sleep."** A method introduced of recent years for lessening the pangs of childbirth. By use of appropriate drugs, while pain is felt at the time, the woman has no recollection of it when the effects wear off.
- Ubiquity** (youbik-wety). Presence everywhere at the same moment, for example, the atmosphere.
- Umbilicus** (umbeeli-kuz). The navel.
- Uranism** (oorah-nizm). One form of homologous sexual aberration, generally between males. (Sometimes spelled "urnism.")
- Ureters** (you-ree-terz). The tubes, one on each side, which bring urine from the kidneys down to the bladder.
- Urethra** (you-ree-thraw). The channel—long in male, short in female—through which the contents of the bladder are emptied.
- Urethritis** (you-ree-thry-tiz). Inflammation of the lining of this channel.
- Urethrorrhea** (you-reeth-ror-eah). A discharge from the lining of the urethra.
- Uterine** (you-terin). Belonging to or connected with the uterus.
- Uterus** (you-ter-uz). Latin name for "the womb."
- Vagina** (vaji-nah). The passage from the vulva to the womb, for copulation, and through which the child is born.
- Vaginismus** (vajee-nizmuz). Painful spasm of the muscles surrounding the vagina.
- Varicocele** (vahrkriko-seal). An enlarged and swollen condition of the veins in the spermatic cord which supports the testicle.
- Vas deferens** (vaz deff-erenz). The tube by which the "seed" (seminal fluid), escapes from the testicle.
- Venereal** (venee-reul). Diseases transmitted by sexual relations. (From Venus, the goddess of Love.)
- Vesical** (vesee-kal). Of or pertaining to the urinary bladder.
- Virginity** (vergin-itee). State of women who have never had sexual intercourse.
- Viscera** (viz-serah). The organs in the large body cavities. (Lungs and heart in chest; stomach, liver and bowels in abdomen, etc.)
- Viscid** (viz-id). Sticky, like white of egg.
- Vita sexualis** (veetah sekshu-ah-lis). Latin for "sexual life."
- Vitelline membrane** (vita-leen mam-brain). The covering of the human egg.
- Vitiated** (vishee-atud). Something which has been made imperfect or faulty.

**Viva voce** (veeva vosay). By word of mouth.

**Voluptuous** (volup-shu-ous). The temperament which enjoys pleasure and luxury. Generally said of persons given to excessive gratification of the sexual appetite.

**Vulva** (vol-vah). The name used for the external genitalia of the female.

**Vulvovaginal Gland** (volvovaj-eenal). A small mass on each side of the vulva; during coitus it furnishes much mucus for lubricating the parts.

**Wassermann Test** (Vawser-man).

A very reliable means of detecting syphilis; named after its discoverer.

**Waterbrash**, "sour stomach."

Burning sensation, with belching of gas, or spitting of sour fluid, due to "dyspepsia."

**"Whites," The.** A discharge from the birth-canal, caused by disease of that canal, or of the womb (leucorrhea).

**Womb** (woom). The muscular bag or sac which holds and protects the child for about 280 days, until the time for it to be born. (In Latin "uterus.")

## BIBLIOGRAPHY

**T**HIS is a bibliography of books and pamphlets referred to in compiling the manuscript for "Sex Searchlights." A great many of these authors were quoted and where this was done the author was given full credit. It is submitted for the convenience of those wishing to purchase books by authors quoted in this "Anthology of Sex Knowledge."

- Ackerman, Jessie A.**—Pure Life for Two. A. H. Crist Co., Cooperstown, N. Y.
- Adler, Felix**—Influence of Manual Training on Character. A. H. Crist Co., Cooperstown, N. Y.
- Armitage, Robert B.**—Never Told Stories (1918). Private Sex Advice to Women (1918). Sex Force (1913). Sex Secrets (1918). Advanced Thought Publishing Co., Chicago.
- Arnold, C. W.**—Impurity in Schools, and How to Deal With It. A. H. Crist Co., Cooperstown, N. Y.
- Asch, P.**—Gonorrhea (1917). Rebman Co., New York.
- Ashton, Alice M.**—A Wise Young Wife. Going Home to Father and Mother. A. H. Crist Co., Cooperstown, N. Y.
- Balliet, Thos. M.**—Manual Training in the Elementary Schools. A. H. Crist Co., Cooperstown, N. Y.
- Bandler, Samuel Willis**—The Expectant Mother (1916). W. B. Saunders Co., Philadelphia.
- Barnesby, Norman**—Medical Chaos and Crime (1910). Mitchell Kennerley, New York.
- Belfield, W. T.**—Sexual Hygiene for Young Men. The American Social Hygiene Assn., New York.
- Berkeley, Comyns**—A Handbook of Midwifery (1921). Paul B. Hoeber, New York.
- Bigelow, M. A.**—Sex Education (1916). The Macmillan Co., New York.
- Bigelow, M. A.**—The Educational Attack Upon Problems of Social Hygiene. The American Social Hygiene Assn., New York.
- Blackmer, Rollin C.**—Sexual Jurisprudence (1911). The Philmar Co., St. Louis.
- Blanchard, Phyllis**—The Adolescent Girl (1920). Moffat, Yard & Co., New York.
- Bloch, Iwan**—The Sexual Life of Our Time (1908). Rebman Co., New York.
- Bradley, Wm. Aspenwall**—The Social Hygiene Sergeant. The American Social Hygiene Assn., New York.
- Brann, Wm. Cowper**—The Works of Brann the Iconoclast. 12 vols. (1898). The Brann Publishers, Inc., New York.
- Brewer, M. Wilfong**—The Girl and Her Relations With Men. A. H. Crist Co., Cooperstown, N. Y.
- Brieux, Eugene**—Damaged Goods (1913) — Novelized by



- Upton-Sinclair. The John C. Winston Co., Philadelphia.
- Brown, Helen W.**—Child Questions and Their Answers. The American Social Hygiene Assn., New York.
- Brown, Louise Fargo**—The Responsibility of the Dean of Women for Sex Instruction. The American Social Hygiene Assn., New York.
- Bruner, P. M.**—The Integrity of the Sex Nature. A. H. Crist Co., Cooperstown, N. Y.
- Burgess, Clara Amy**—The Sex Philosophy of a Bachelor Girl. Advanced Thought Publishing Co., Chicago.
- Buzzacott, Francis H.**—Mystery of the Sexes (1914). Advanced Thought Publishing Co., Chicago.
- Cady, B. C., and V. M.**—The Way Life Begins. The American Social Hygiene Assn., New York.
- Capp, Wm. M.**—The Daughter: Her Health, Education and Wedlock (1891). F. A. Davis Co., Philadelphia.
- Carleton, Sprague**—The Seriousness of Venereal Disease (1908). Paul B. Hoeber, New York.
- Chapman, Mrs. Woodallen**—In Her Teens (1914). How Shall I Tell My Child? (1912). Fleming H. Revell Co., New York.
- Clark, J. Bayard**—The Control of Sex Infections (1921). Macmillan Co., New York.
- Clouston, Sir Thos.**—Before I Wed; or, Young Men and Marriage (1913). Cassell & Co., Ltd., London.
- Cocks, Orrin G.**—Social Evil and Methods of Treatment (1912). Association Press, New York.
- Cook, W. W.**—The Father as His Son's Counselor. A. H. Crist Co., Cooperstown, N. Y.
- Cooper, Arthur**—The Sexual Disabilities of Man (1920). Paul B. Hoeber, New York.
- Corbett-Smith, A.**—The Problem of the Nations (1914). Paul B. Hoeber, New York.
- Davids, Eleanor**—The Ideal Mother. A. H. Crist Co., Cooperstown, N. Y.
- Davis, Frank P.**—Impotency, Sterility and Artificial Impregnation (1917). C. V. Mosby Co., St. Louis.
- Dawson, E. Rumley**—The Causation of Sex in Man (1917). Paul B. Hoeber, New York.
- Dawson, Geo. E.**—The Right of the Child to Be Well Born. Funk & Wagnalls Co., New York.
- Dennett, Mary Ware**—The Sex Side of Life. Privately Published by Mary Ware Dennett, 350 W. 55th St., New York.
- Densmore, Emmett**—Sex Equality (1907). Funk & Wagnalls Co., New York.
- Densmore, Margaret M. C.**—Parenthood and Purity. A. H. Crist Co., Cooperstown, N. Y.
- Donovan, Frances**—The Woman Who Waits (1920). Richard G. Badger, Boston.
- Drake, Emma F. A.**—What a Young Wife Ought to Know (1901). What a Woman of Forty-five Ought to Know (1902). The Vir Publishing Co., Philadelphia.
- Drake, Emma F. A.**—The Parent's Guide (1917). J. L. Nichols & Co., Naperville, Ill.

- Drake, Emma F. A.**—Preparation for Parenthood (1911). Arthur H. Crist Co., Cooperstown, N. Y.
- Dreiser, Theodore**—Sister Carrie (1900). The Hand of the Potter. Boni & Liveright, New York.
- Drysdale, C. V.**—The Small Family System (1917). B. W. Huebsch, New York.
- Eddy, W. H.**—Reproduction and Sex Hygiene. The American Social Hygiene Assn., New York.
- Edwards, Ernest**—Personal Purity for Girls (1909). Personal Purity for Young Women (1909). Personal Purity for Boys (1909). Personal Purity for Young Men (1909). R. F. Fenno & Co., New York.
- Eliot, W. G.**—The School Teacher and Sex Education. U. S. Public Health Service, Washington, D. C.
- Ellis, Mrs. Havelock**—Love in Danger (1915). Houghton Mifflin Co., New York.
- Ellis, Havelock**—Studies in the Psychology of Sex—6 Vols. Vol. 1—The Evolution of Modesty, Sexual Periodicity and Auto-erotism (1900). Vol. 2—Sexual Inversion (1901). Vol. 3—Analysis of the Sexual Impulse (1903). Vol. 4—Sexual Selection in Man (1905). Vol. 5—Erotic Symbolism (1906). Vol. 6—Sex in Relation to Society (1910). F. A. Davis Co., Philadelphia.
- Ellis, Havelock**—Man and Woman. The Criminal (1904). Charles Scribner's Sons, New York.
- Ellis, Havelock**—Essays in War Time (1917). Task of Social Hygiene (1916). Houghton, Mifflin Co., Boston.
- Ellis, Havelock**—The Objects of Marriage. The Love Rights of Women. Small or Large Families. New York Women's Publishing Co., New York.
- Everett, Ray H.**—The Failure of Segregation as a Protector of Innocent Womanhood. The American Social Hygiene Assn., New York.
- Exner, M. J.**—Rational Sex Life for Men (1914). Problems and Principles of Sex Education. The Physician's Answer. Friend or Enemy. Association Press, New York.
- Fawcett, James Waldo** — The Trial of Wm. Sanger. New York Women's Publishing Co., New York.
- Ferenczi, S.**—Sex in Psycho-Analysis (1916). Richard G. Badger, Boston.
- Fielding, Wm. J.**—Sanity in Sex (1920). Dodd, Mead & Co., New York.
- Fite, Warner**—Birth Control and Biological Ethics. New York Women's Publishing Co., New York.
- Flexner, Abraham** — Prostitution in Europe (1914). Modern Book Society, New York.
- Foerster, F. W.**—Marriage and the Sex Problem. Frederick A. Stokes Co., New York.
- Forel, August**—The Sexual Question. Modern Book Society, New York.
- Fosdick, Raymond B.**—Prostitution and the Police. The American Social Hygiene Assn., New York.



- Foster, Eugene C.**—Better Than a Fortune. Associated Press, Chicago.
- Foster, William T.**—The Social Emergency (1914). Houghton Mifflin Co., Boston.
- Freud, Sigmund**—Totem and Taboo (1918). Moffat, Yard & Co., New York.
- Galbraith, Anna M.**—Four Epochs of Woman's Life (1901). Personal Hygiene and Physical Training for Women (1911). W. B. Saunders Co., Philadelphia.
- Gallichan, Walter M.**—The Psychology of Marriage (1918). Letters to a Young Man on Love and Health (1920). Frederick A. Stokes Co., New York.
- Galloway, Thos. Walton**—Sex and Life (1919). Association Press, New York.
- Galloway, Thos. Walton**—Biology of Sex (1913). D. C. Heath & Co., New York.
- Gamble, Eliza Burt**—The Sexes in Science and History (1893). G. P. Putnam's Sons, New York.
- Gavit, John Palmer**—Some Information for Mother, or How One Man Answered the Questions of a Child About Reproduction. New York Evening Post, New York.
- Geddes, Patrick and Thompson, Arthur**—Sex (1914). Henry Holt & Co., New York.
- Gilbert, J. Allen**—True and False Sex Alarms (1916). Rebman Co., New York.
- Gilman, Charlotte Perkins**—The Punishment that Educates. A. H. Crist Co., Cooperstown, N. Y.
- Goddard, Henry H.**—Psychology of the Normal and Subnormal. The Kallikak Family. Feeble-mindedness (1916). Dodd, Mead & Co., New York.
- Goodnow, Marc. N.**—Getting Acquainted With My Boy. A. H. Crist Co., Cooperstown, N. Y.
- Gould, Arthur**—Science of Sex Regeneration (1911). Advanced Thought Publishing Co., Chicago.
- Greene, Jerome D.**—Medical Aspects of Social Hygiene. The American Social Hygiene Assn., New York.
- Greene, Marie A.**—Little Journeys Into the Heart of True Things (1920). Burton Publishing Co., Kansas City.
- Greer, Jos. H.**—Sex Science (1911). Stanton & Van Vliet, Chicago.
- Griggs, Edw. Howard**—Friendship, Love and Marriage (1915). Moral Education (1903). B. W. Huebsch, New York.
- Grimke, Angelina W.**—Rachel. New York Women's Publishing Co., New York.
- Groves, Ernest R.**—Moral Sanitation (1916). Association Press, New York.
- Guernsey, Henry M.**—Plain Talks on Avoided Subjects (1882). F. A. Davis Co., Philadelphia.
- Guild, Ellis B.**—The Science and Philosophy of Eugenics (1920). Burton Publishing Co., Kansas City.
- Gulick, Luther H.**—Dynamic of Manhood (1917). Association Press, New York.
- Guyer, N. F.**—Being Well Born (1916). Bobbs-Merrill Co., Indianapolis.



- Hague, W. Grant**—The Eugenic Marriage (1913). 4 Vol. Review of Reviews Co., New York.
- Hall, Winfield Scott**—Life Problems (1913). American Medical Association, Chicago.
- Hall, Winfield Scott** — From Youth Into Manhood (1909). Association Press, New York.
- Hall, Winfield Scott**—Instead of Wild Oats (1912). Fleming H. Revell Co., New York.
- Hall, Winfield Scott** — Sexual Knowledge (1916). The John C. Winston Co., Philadelphia.
- Hall, Winfield Scott**—Sex Training in the Home (1920). The Midland Press, Chicago.
- Hartley, C. Gasquoin**—Women's Wild Oats (1920). Frederick A. Stokes Co., New York.
- Hartley, C. Gasquoin** — Motherhood (1917). The Age of Mother-Power (1914). Dodd, Mead & Co., New York.
- Hayden, James** — Venereal Diseases (1916). Lea & Febiger, Philadelphia.
- Heape, Walter**—Preparation for Marriage (1914). Cassell & Co., Ltd., London.
- Heape, Walter**—Sex Antagonism (1913). Constable & Co., Ltd., London.
- Heaton, Walter** — Temperament and Sex (1919). Richard G. Badger, Boston.
- Hellman, Alfred M.** — Twilight Sleep (1915). Paul B. Hoeber, New York.
- Herbert, S.**—An Introduction to the Physiology and Psychology of Sex (1917). The First Principles of Heredity (1910). A. & C. Black, Ltd., London.
- Herbert, Mrs. S.** — Sex Lore (1918). A. & C. Black, Ltd., London.
- Herman, Geo. Ernest** — Diseases of Women (1913). Funk & Wagnalls Co., New York.
- Holt, E. B.**—The Freudian Wish: Its Place in Ethics (1915). Henry Holt & Co., New York.
- Holt, Wm. L.** — The Venereal Peril (1914). The Critic and Guide Co., New York.
- Hood, W. L.**—For Girls and the Mothers of Girls (1914). The Bobbs-Merrill Co., Indianapolis.
- Hormel, Margaret Stewart**—Purity in the Home. A. H. Crist
- Howard, Clifford**—Sex Worship (1898). Chicago Medical Book Co., Chicago.
- Howard, Wm. Lee**—Confidential Chats With Boys (1911). Confidential Chats With Girls (1911). Facts for the Married (1912). Plain Facts on Sex Hygiene (1910). Sex Problems Solved (1915). Edward J. Clode, New York.
- Howard, Wm. Lee**—Start Your Child Right (1910). Fleming H. Revell Co., New York.
- Howe, Joseph W.** — Excessive Venery. E. B. Treat & Co., New York.
- Howe, W. Lewis**—Care of the Expectant Mother (1903). F. A. Davis Co., Philadelphia.
- Howell, Wm. H.** — The Sexual Necessity. The American Social Hygiene Assn., New York.
- Huhner, Max**—Disorders of the Sexual Function (1916). F. A. Davis Co., Philadelphia.
- Hutchinson, Sir Jonathan**—Syphilis. Funk & Wagnalls, New York.

- Irwin, Will**—Conquering an Old Enemy (1920). American Social Hygiene Assn., New York.
- Jacobson, D. J.**—The Control of Venereal Diseases. U. S. Public Health Service, Washington, D. C.
- Jones, Ernest** — Psycho-Analysis (1920). Wm. Wood & Co., New York.
- Jordan, Wm. Geo.**—Little Problems of Married Life (1910). Fleming H. Revell Co., New York.
- Kammerer, P. C.**—The Unmarried Mother (1918). Little, Brown & Co., Boston.
- Kathren, Richard D.**—Let's Civilize the Marriage Laws (1913). Burton Publishing Co., Kansas City.
- Kerley, Chas. G.**—What Every Mother Should Know (1915). Paul B. Hoeber, New York.
- Key, Ellen**—The Younger Generation (1914). The Woman Movement (1912). Love and Marriage (1911). Renaissance of Motherhood (1914). The Education of the Child (1909). The Century of the Child (1909). G. P. Putnam's Sons, New York.
- Key, Ellen**—Love and Ethics (1911). B. W. Huebsch, New York.
- Keyes, Edw. L.**—Morals and Venereal Disease. The American Social Hygiene Assn., New York.
- King, E. A.**—Sex Problems of Young Men. A. H. Crist Co., Cooperstown, N. Y.
- Kisch, Heinrich**—The Sexual Life of Women (1916). Rebman Co., New York.
- Knopf, S. Adolphus**—Birth Control. New York Women's Publishing Co., New York.
- Krafft-Ebing, R. V.** — Psychopathia Sexualis. Modern Book Society, New York.
- Latimer, C. Wormeley** — The Changing Girl (1913). Fleming H. Revell Co., New York.
- Lay, Wilfrid**—Man's Unconscious Passion (1920). Modern Book Society, New York.
- Lay, Wilfrid**—Man's Unconscious Conflict (1917). The Child's Unconscious Mind (1919). Dodd, Mead & Co., New York.
- Levy, Louis Henry**—Pictorial Review's Correspondence Course in Sex - Education. Pictorial Review, New York.
- Lewers, Arthur H. N.**—Diseases of Women (1912). Paul B. Hoeber, New York.
- Lowry, E. B.**—Your Baby (1915). Confidences (1910). False Modesty (1912). Himself (1912). Herself (1911). Preparing for Womanhood (1918). Truths (1911). Teaching Sex Hygiene (1914). The Woman of Forty (1919). Forbes & Co., Chicago.
- Lucka, Emil**—Eros (1915). G. P. Putnam's Sons, New York.
- Lumb, Capt. Norman**—Treatment of Gonorrhea (1920). Lea & Febiger, Philadelphia.
- Lutes, Della Thompson**—To Fathers of Sons. A. H. Crist Co., Cooperstown, N. Y.
- Lydston, G. Frank**—Sex Hygiene for the Male (1912). The Hamming Publishing Co., Chicago.
- Lydston, G. Frank**—Diseases of Society and Degeneracy. Riverton Press, Chicago.
- Lytle, H. W., and Dillon, John**—From Dance Hall to White



- Slavery (1912). Stanton & Van Vliet, Chicago.
- MacFadden, Bernarr**—Manhood and Marriage (1916). Womanhood and Marriage (1918). Physical Culture Publishing Co., New York.
- Maeterlinck, Maurice**—Mary Magdalene (1910). The Life of the Bee (1919). The Betrothal (1918). Dodd, Mead & Co., New York.
- Malchow, C. W.**—The Sexual Life (1907). C. V. Mosby Co., St. Louis.
- March, Norah H.**—Towards Racial Health (1919). E. P. Dutton & Co., New York.
- Marsden, Orison Swett**—The Crime of Silence (1915). Physical Culture Publishing Co., New York.
- Marshall, F. H. A.**—The Physiology of 'Reproduction' (1910). Longmans, Green & Co., New York.
- May, Otto**—The Prevention of Venereal Diseases in the Army. The American Social Hygiene Assn., New York.
- Maynard, A. Gertrude**—The Fussy Mother. A. H. Crist Co., Cooperstown, N. Y.
- Meisel-Hess, Grete**—The Sexual Crisis (1917). Critic & Guide Co., New York.
- Menzies, K.**—Autoerotic Phenomena in Adolescence (1921). Paul B. Hoeber, New York.
- Michels, Robert**—Sexual Ethics. Charles Scribner's Sons, New York.
- Miner, Maude**—The Slavery of Prostitution. The Macmillan Co., New York.
- Mitchell, Louise D.**—The Confessions of a Mother. A. H. Crist Co., Cooperstown, N. Y.
- Modeland, Margaret J.**—The Expectant Mother and Her Child (1915). The John C. Winston Co., Philadelphia.
- Moll, Albert**—The Sexual Life of the Child (1912). The Macmillan Co., New York.
- Moore, Harry H.**—Keeping in Condition. The Macmillan Co., New York.
- Mordell, Albert**—The Erotic Motive in Literature. Boni & Liveright, New York.
- More, Adelyne**—Uncontrolled Breeding. New York Women's Publishing Co., New York.
- Morrow, Prince A.**—Eugenics and Racial Poisons. The Boy Problem. Instruction in the Physiology and Hygiene of Sex. The Sex Problem. The Young Man's Problem. The American Social Hygiene Assn., New York.
- Nichols, J. L.**—Know Thyself (1903). Safe Counsel. J. L. Nichols & Co., Naperville, Ill.
- Northcote, H.**—Christianity and Sex Problems (1906). F. A. Davis Co., Philadelphia.
- Nyström, Anton**—The Natural Laws of Sexual Life (1908). C. V. Mosby Co., St. Louis.
- Oppenheim, James**—Wild Oats (1910). B. W. Huebsch, New York.
- Oppenheimer, H.**—Gonorrhea in the Male (1910). Rebman Co., New York.
- O'Shea, M. V.**—The Trend of the Teens (1920). Frederick J. Drake & Co., Chicago.
- Osler, William**—A Way of Life (1913). Man's Redemption of Man (1910). Paul B. Hoeber, New York.



- Pancost, S.**—Ladies' New Medical Guide (1901). Stanton & Van Vliet, Chicago.
- Parke, J. Richardson** — Human Sexuality (1910). Professional Publishing Co., Philadelphia.
- Paul, Cedar** — Population and Birth Control. New York Women's Publishing Co., New York.
- Peabody, James E.**—Sex Education in the Home and High School. The American Social Hygiene Assn., New York.
- Philip, A. A., and Murray, H.**—Knowledge a Young Man Should Have. Knowledge a Young Woman Should Have. David McKay, Philadelphia.
- Pierce, C. C.**—The Public Health Service Against Venereal Diseases. The American Social Hygiene Assn., New York.
- Pomeroy, H. S.**—Is Man Too Prolific? (1891). The Ethics of Marriage (1888). Funk & Wagnalls Co., New York.
- Pullman, Ray W.**—Police and the Public Health. The American Social Hygiene Assn., New York.
- Pusey, W. A.**—Syphilis as a Modern Problem (1915). The American Medical Association, Chicago.
- Robie, W. F.**—Rational Sex Ethics, Vol. 1 (1916). Rational Sex Ethics, Vol. 2 (1919). Sex and Life (1920). The Art of Love (1921). Richard C. Badger, Boston.
- Robinson, Victor** — Pioneers of Birth Control (1919). Voluntary Parenthood League, New York.
- Robinson, William J.** — Sexual Problems of Today (1912). Sex Knowledge for Men (1916). Sex Knowledge for Women (1917). Sex Morality, Past, Present and Future (1912). Sexual Truths (1919). The Limitation of Offspring (1919). Eugenics and Marriage (1917). Never Told Tales (1908). Population and Birth Control (1917). A Practical Treatise on the Causes, Symptoms and Treatment of Sexual Impotence and Other Venereal Diseases (1919). Stories of Love and Life (1913). Small or Large Families (1917). Treatment of Gonorrhea and Its Complications in Men and Women (1915). Woman: Her Sex and Love Life (1919). Critic and Guide Co., New York. (See Adv., Last Page.)
- Ross, Edward A.**—Social Control. Social Psychology. The Macmillan Co., New York.
- Rummel, Luella** — Womanhood and Its Development (1912). Burton Publishing Co., Kansas City.
- Saleeby, C. W.**—The Progress of Eugenics (1914). Funk & Wagnalls Co., New York.
- Saleeby, C. W.** — Woman and Womanhood (1911). Mitchell Kennerley, New York.
- Salmon, Arthur L.**—The Man and the Woman (1913). Forbes & Co., Chicago.
- Sanger, Margaret** — What Every Mother Should Know (1916). What Every Girl Should Know. The Birth Control Movement. A Short Statement on Birth Control. New York Women's Publishing Co., New York.
- Sanger, Margaret** — Woman and the New Race (1920). Brentano's, New York.

- Sanger, W. W.**—History of Prostitution (1897). The Medical Publishing Co., New York.
- Scharlieb, Mary**—What It Means to Marry. Youth and Sex. Funk & Wagnalls Co., New York.
- Scott, James Foster**—The Sexual Instinct. E. B. Treat & Co., New York.
- Sinclair, Upton**—Sylvia (1913). Sylvia's Marriage (1914). John C. Winston Co., Philadelphia.
- Slocum, Mrs. Anette**—For Wife and Mother. Shrewesbury Publishing Co., Chicago.
- Smart, I. Thompson**—What a Young Mother Should Tell Her Daughter (1911). What a Young Mother Should Tell Her Little Girl (1911). What a Young Father Should Tell His Little Boy (1911). What a Young Father Should Tell His Son (1911). Funk & Wagnalls Co., New York.
- Smith, Nellie M.**—The Mother's Reply. Three Gifts of Life. U. S. Public Health Service, Washington, D. C.
- Smith, Wm. Hawley**—Children by Chance or by Choice (1920). Richard G. Badger, Boston.
- Snow, Wm. F.**—The Medical Adviser and His Correspondence File. The American Social Hygiene Assn., New York.
- Snow, Wm. F.**—Public Health Measures in Relation to Venereal Diseases. U. S. Public Health Service, Washington, D. C.
- Sperry, Lyman B.**—Confidential Talks With Young Men (1898). Confidential Talks With Young Women (1898). Husband and Wife (1900). Fleming H. Revell Co., New York.
- Stacpoole, Florence**—Advice to Women on the Care of Their Health (1917). Funk & Wagnalls Co., New York.
- Stacpoole, Florence**—Advice to Women. S. Ogilvie Publishing Co., New York.
- Stall, Sylvanus**—What a Young Boy Ought to Know (1909). What a Young Man Ought to Know (1904). What a Young Husband Ought to Know (1907). What a Man of Forty-five Ought to Know (1901). The Vir Publishing Co., Philadelphia.
- Steinhardt, I. D.**—Ten Sex Talks to Girls (1914). Ten Sex Talks to Boys (1914). J. B. Lippincott Co., Philadelphia.
- Stephens, Margaret**—Woman and Marriage (1910). Frederick A. Stokes Co., New York.
- Stiles, Henry Reed**—Bundling. Knickerbocker Publishing Co., Albany, N. Y.
- Stokes, John H.**—The Third Great Plague (1917). W. B. Saunders Co., Philadelphia.
- Stokes, John H.**—Today's World Problem in Disease Prevention (1919). U. S. Public Health Service, Washington, D. C.
- Stone, Lee Alexander**—Sex Discussion (1917). An Open Talk With Mothers and Fathers (1920). The Woman of the Streets (1919). The Hidden Menace (1919). Burton Publishing Co., Kansas City.
- Stone, Lee Alexander**—Eugenically Speaking (1921). Are Children Getting a Square Deal? (1921). Blood Will Tell (1921). The Home Health Publishing Co., Inc., Chicago.
- Stone, Lee Alexander**—Racial Efficiency. A Step Forward to



- Better Citizenship. Wisconsin State Board of Health.
- Stopes, Marie Carmichael**—Married Love (1918). The Critic and Guide Co., New York.
- Storey, T. A.**—Work of the U. S. Interdepartmental Social Hygiene Board. The American Social Hygiene Assn., New York.
- Talmey, Bernard S.**—Love (1919). Modern Book Society, New York.
- Thomas, Wm. I.**—Sex and Society (1907). Richard G. Badger, Boston.
- Thomson, Arthur** — Heredity (1907). G. P. Putnam's Sons, New York.
- Tippy, Worth M.**—The Place of the Church in the Control of Venereal Disease. U. S. Public Health Service, Washington, D. C.
- Tuttle, Florence Guertin** — The Awakening of Woman. World and World Federation. New York Women's Publishing Co., New York.
- Ulrich, Mabel S.**—The Girl's Part. Facts for Young Women. Mothers of America. On Marriage. A Straight Talk to Boys. U. S. Public Health Service, Washington, D. C.
- Urlin, Ethel L.**—A Short History of Marriage. David McKay, Publisher, Philadelphia.
- Vecki, Victor G.**—Sexual Impotence (1920). W. B. Saunders Co., Philadelphia.
- Vedder, Edw. B.**—Syphilis and Public Health (1918). Lea & Febiger, Philadelphia.
- Walling, Wm. H.** — Sexology (1904). Puritan Publishing Co., Philadelphia.
- Watson, David** — Gonorrhea and Its Complications in the Male and Female (1916). Paul B. Hoeber, New York.
- Watson, J. A. S.** — Heredity. Dodge Publishing Co., New York.
- Watt, H. J.**—Psychology. Dodge Publishing Co., New York.
- Weininger, Otto**—Sex and Character. Modern Book Society, New York.
- Weir, James, Jr.**—Religion and Lust (1897). Chicago Medical Book Co., Chicago.
- Westermarck**—History of Human Marriage. The Macmillan Co., New York.
- Williams, M. B.**—Sex Problems (1901). Fleming H. Revell Co., New York.
- Withrow, Oswald C. J.**—Talks on Sex Education (1919). Frederick D. Goodchild, Toronto.
- Wood-Allen, Mary** — What a Young Girl Ought to Know (1905). What a Young Woman Ought to Know (1913). The Vir Publishing Co., Philadelphia.
- Wood-Allen, Mary** — Ideal Married Life (1901). Fleming H. Revell Co., New York.
- Wood - Allen, Mary** — Teaching Truth (1907). Parent's Problems (1907). Caring for the Baby (1907). Almost a Man (1907). Almost a Woman (1913). Adolescence. Confidential Relations Between Mothers and Daughters. A Friendly Letter to Boys. Keep Mother and Me Intimate. A Noble Father. Purification of Desire. Preparation for Parenthood. What Shall be Taught and Who Should Teach It. When Does



- Bodily Education Begin? The Arthur H. Crist Co., Coopers-town, N. Y.
- Woods, Robert A.**—Prohibition and Social Hygiene. The American Social Hygiene Association, New York.
- Wrench, G. T.**—The Healthy Marriage (1917). Paul B. Hoeber, New York.
- Yore, Clem.**—Songs of the Underworld (1914). Stanton & Van Vliet, Chicago.
- Young, Meredith**—The Mentally Defective Child (1919). Paul B. Hoeber, New York.
- Zenner, Philip**—Education in Sexual Physiology and Hygiene (1913). Stewart & Kidd, Cincinnati.

## BOOKS TO READ ON SOCIAL AND SEX HYGIENE

By DR. LEE ALEXANDER STONE

Following my lectures to civic audiences, I am constantly being asked, "What must I read?" The following list of books has been carefully chosen from a large selection to be found in my own library. They will serve to enlighten the minds of those interested in social and sex hygiene. One list marked "For Advanced Readers" comprises books to be read by students and teachers. The list marked "Non-Technical" will be of general interest to those who are reading simply to inform themselves.

Social hygiene is involved with everything that looks toward race improvement. Those who expect to become proficient in this new phase of social science must be students of ethics, religion, ethnology, and of the history, both ancient and modern, of the causes for the development of civilization. They must, without prejudice, read the story of life, as told by the historians of different races since the dawn of creation.

The social hygienist must taboo anything that savors of religious bigotry. He must be broad enough in his knowledge of moral ethics to realize that "morality" is largely a question of chronography, geography, and individual point of view. He under no circumstances should stand for a type of inquisition which is being advocated today by certain self-styled social hygiene organizations, which are in reality nothing more than detective agencies engaged in "framing" on female delinquents. These delinquents become offenders many times because of ignorance and poverty. Frequently they are feeble-minded. They are usually persecuted and prosecuted by ascetics and modern "Cyrils." Many of the methods practiced by some of these organizations would do credit to the frightfulness of the "dark ages."

Havelock Ellis in his book, "The Task of Social Hygiene," has this to say regarding sex hygiene:

"Sexual hygiene in the full sense—in so far as it concerns individual action and not the regulative or legislative action of communities—is the art of imparting such knowledge as is needed at successive stages by the child, the youth, and maiden, the young

man and woman, in order to enable them to deal rightly, and so far as possible without injury either to themselves or to others, with all those sexual events to which everyone is naturally liable. To fulfill his functions adequately the master in the art of teaching sexual hygiene must answer to three requirements: (1) he must have a sufficient knowledge of the facts of sexual psychology sexual physiology, and sexual pathology, knowledge which, in many important respects, hardly existed at all until recently, and is only now beginning to become generally accessible; (2) he must have a wise and broad moral outlook, with a sane idealism which refrains from demanding impossibilities, and resolutely thrusts aside not only the vulgar platitudes of worldliness, but the equally mischievous platitudes of an outworn and insincere asceticism, for the wise sexual hygienist knows, with Pascal, that 'he who tries to be an angel becomes a beast,' and is less anxious to make his pupils ineffective angels than effective men and women, content to say with Browning, 'I may put forth angels' pinions, once unmanned but not before'; (3) in addition to sound knowledge, and a wise moral outlook, the sexual hygienist must possess, finally, a genuine sympathy with the young, an insight into their sensitive shyness, a comprehension of their personal difficulties, and the skill to speak to them simply, frankly and humanly."

The following books have been selected with the hope that they may be read and studied. I commend them to those interested in saving the next generation from itself.

### BOOKS FOR SOCIAL AND SEX HYGIENE FOR ADVANCED READERS

**Task of Social Hygiene**—Havelock Ellis. The very best work on the subject. Should be in the library of all interested in education and in furthering the advance of civilization. Houghton, Mifflin Co., Boston.

**Essays in War Times**—Havelock Ellis. Houghton, Mifflin Co., Boston.

**Syphilis and the Public Health**—Vedder. A book which compares very favorably with

Fournier's essays on syphilis. Lea & Febiger, Philadelphia, Pa.

**The Unmarried Mother**—Kammerer. Splendid for the social worker. A study of the causes of illegitimacy. Little, Brown & Co., Boston.

**Motherhood**—Mrs. C. Gasquoine Hartley.

**The Truth About Woman**—Mrs. C. Gasquoine Hartley. These two books deal with the posi-



tion of woman in society from ancient times down to modern. I know of no books on the ethical relationship of woman to society as valuable as these. They are filled with a mass of interesting material that will be of value to readers. Dodd, Mead Co., New York.

**The Great Unmarried**—Gallichan. **Psychology of Marriage**—Gallichan. Stokes, New York.

**The Third Great Plague**—Dr. J. H. Stokes. A study of syphilis written for the layman. W. B. Saunders Co., Philadelphia.

**Social Diseases and Marriage**—Morrow. Dr. Prince A. Morrow was one of the pioneers in social hygiene. His book is a classic, but is now out of print.

**History of European Morals**—Lecky.

**Diseases of Society and Degeneracy**—Lydston. This book by Dr. G. Frank Lydston should be in every library. Lombroso classed it as being one of the most valuable contributions to science written in years. Riverton Press, Chicago.

**The Awakening of Spring**—(Drama). Frank Wedekind. This drama arraigns society for tabooing sex education. Mothers and teachers should study it. Wedekind possesses a wonderful knowledge of child psychology.

**The Family**—Parsons. Putnam, New York.

**The Betrothal**—Maeterlinck. Dodd, Mead & Co., New York.

**Prevention of Venereal Diseases**—Sir Archdall Reid, K. B. E., M. B., C. M., F. R. S. E., with an introductory chapter by Sir Bryan Donkin, M. D., F. R. S.

P. This book is addressed on the one hand to those who would prevent venereal disease in themselves, and, on the other, to those who would prevent it in the community. Heine-mann, London.

**Eros**—Lucka. A remarkable book for the teacher of sex hygiene who wishes to establish a background for his arguments. Putnam, New York.

**Sexual Ethics**—Michels' "Sexual Ethics" is a study of conditions in Europe before the war—excellent. Charles Scribner's Sons, New York.

**Sexual Life of the Child**—Moll. This is the best book to be had on the subject it treats of. Should be in every library. Macmillan Co., New York.

**Morale and Its Enemies**—Hocking. Yale University Press.

**The Jewish Child**—Feldman. A reliable first-hand account of all the phases and aspects of Jewish child life. Baillière, Tindall & Cox, London.

**Sanity in Sex**—William J. Fielding. An illuminating exposition on the sex question, from the standpoint of the vital individual, social and economic problems. The volume is highly endorsed by many European and American authorities, including Havelock Ellis, Margaret Sanger, Dr. Maud Thompson, August Claessens. Dodd, Mead & Co., New York.

**History of Prostitution**—Sanger.

**History of Human Marriage**—Westermarck. A scientific study of the institution of marriage. The best book ever published on the subject. Macmillan, New York.

**The Evolution of Marriage**—Le-tourneau. Scribner, New York.

**The Life of the Bee**—Maeterlinck. This book should be read by all students of social and sex hygiene for its charming philosophy and sound reasoning. Dodd, Mead & Co., New York.

**The Slavery of Prostitution**—Maude Miner. An excellent study of prostitution from the pen of an authority. Macmillan, New York.

**The Sexual Question**—Forel. Rebman Co., New York.

**The Woman of the Streets**—Lee A. Stone, M. D. An attack on present-day methods of persecution and prosecution of prostitutes. Burton Publishing Co., Kansas City, Mo.

**Heredity in Relation to Eugenics**—Davenport. A very valuable addition to the library of those who are interested in race improvement. Henry Holt & Co., New York.

**Adolescence**—G. Stanley Hall (2 vols.). A book for students and teachers. Ranks as being the best book of its kind. Appleton, New York.

**Damaged Goods**—Brieux. Brentano, New York.

**Social Psychology**—Edward A. Ross. Macmillan, New York.

**Psychology of the Normal and Subnormal**—Henry H. Goddard. Dr. Goddard stands at the very top as a student and an authority. His studies of the feeble-minded have won him a place among the great scientists of the world. He knows his subject and gives freely of his knowledge. "Psychology of the Normal and Subnormal" is a masterpiece.

**The Kallikak Family**—Goddard. Feeble - mindedness — Goddard. Dodd, Mead & Co.

**The Century of the Child**—Key. This book should be put in the hands of every intelligent mother. Putnam, New York.

## NON-TECHNICAL BOOKS OF GENERAL INTEREST TO STUDENTS OF SOCIAL AND SEX HYGIENE AND TO PARENTS

**Talks on Sex Education**—Dr. Oswald C. J. Withrow. A most excellent book to be turned over to boys or girls after having been read by their parents. F. D. Goodchild Co., Toronto.

**Plain Facts on Sex Hygiene**—Dr. Wm. Lee Howard.

**Sex Problems Solved**—Dr. Wm. Lee Howard.

**Facts for the Married**—Dr. Wm. Lee Howard.

**Confidential Chats With Boys**—Dr. Wm. Lee Howard.

**Confidential Chats With Girls**—Dr. Wm. Lee Howard. These books are from the pen of a scholar, and are eminently superior to many books published on Sex Hygiene. They deserve careful reading. F. J. Clode, New York.

**The Sexual Science Series**—Dr. A. A. Phillip, M. C., C. M., late Medical Officer of Public Health, Northern Division, Scotland, and H. R. Murray. Sexual Science.

**Knowledge a Young Woman Should Have.**

**Knowledge a Young Wife Should Have.**

**Knowledge a Young Husband Should Have.**

This series is somewhat advanced, yet is written in a vein that may be understood by all.

The five volumes deserve a place in the library of every student. Parents may read them to advantage. David McKay, Philadelphia.

**Three Gifts of Life**—Nellie M. Smith. Splendid for young girls of 14 and over. Dodd, Mead & Co., New York.

**Sex Education**—Bigelow. Macmillan Co., New York.

**Womanhood and Its Development**—Luella Z. Runnell. A most excellent book for the young woman. Burton Publishing Co., Kansas City, Mo.

**The Way Life Begins**—B. C. and V. M. Cady, American Social Hygiene Association, New York.

**Keeping in Condition**—Harry H. Moore, Macmillan Co., New York.

**The Nurse and the Knight** (pamphlet). This most excellent pamphlet had a great deal to do with keeping many men straight during the war. Association (Y. M. C. A.) Press, New York.

**The Right of the Child to Be Well Born**—Geo. E. Dawson.

Funk and Wagnalls, New York.  
**Some Information for Mother, or How One Man Answered the Questions of a Child About Reproduction.** John Palmer Gavitt. Splendid. New York Evening Post, New York. 15 cents.

**Today's World Problem in Disease Prevention.** Dr. J. H. Stokes. May be had from U. S. Public Health Service, Washington, D. C.

**The Hidden Menace**—Lee A. Stone, M. D. Free distribution. Burton Publishing Co., Kansas City, Mo.

**An Open Talk With Mothers and Fathers, Presenting Some Present Day Problems in Social Hygiene**—Lee A. Stone, M. D. A frank discussion of the problems involving the teaching of Social Hygiene, and Sex Truths. Burton Publishing Co., Kansas City, Mo.

**The Woman of Forty**—Lowry.

**Preparing for Womanhood**—Lowry.

**Truths**—Lowry.

**False Modesty**—Lowry.

**Teaching Sex Hygiene in the Public Schools**—Lowry.

**Himself**—Lowry.

**Herself**—Lowry. These seven excellent volumes are published by Forbes & Company, Chicago.



## INDEX

### A

- Aberrations, sexual, 25
- Abortifacient, inquiries for, 251
  - often fails, 638
- Abortion, 240, 249
  - anathema against, 263, 649
  - and its results, 254
  - as means for prevention of too many children, 167
  - causing septic peritonitis, 639
  - conditions justifying, 250, 264
  - dangers of, 167, 197, 253, 254
  - degrading, 167
  - frequency of, 151, 152, 260
  - humiliating, 167
  - increasing, 167, 197, 254, 521
  - is not birth control, 142
  - less by half "if every man were straight," 432
  - or birth control, 150, 268
  - question of, 257
  - responsibility of largely due to ignorance of preventive methods, 179
  - self-induced, 490
- Abortionist, escape of from conviction, 650
  - is ignorant, 266
  - not high class, 259
- Abstinence, sexual, 513, 543
  - harmful, 252
  - may cause impotence, 92
- Abulia, due to continence, 88
- Acrochronism, justifiable, 257
- Adolescence, masturbation in, 547
- Adolescent girl, development of color sense in, 557
- After-birth, the, 18, 244
- Age, as cause of impotence, 91
  - at menopause, 218
  - at puberty, 28
- Age, for marriage, 117, 126
- Alarm, cause for lies elsewhere, 169
- Alcohol and sexuality, 581
- Altruism, defeated by autism, 85
  - hard blow to, 252
  - not asceticism, 547
  - not found in quacks, 602
  - of love, 169
- Ambulance or fence, 717
- Ameba*, simple structure of, 1
- Amenorrhea, causes of, 37
- Anathema, against abortion, 263, 649
  - against Onanism, 144
- Anatomy, of birth canal, 13
  - of breasts, 18
  - of clitoris, 18
  - of egg-glands, 16
  - of egg-tubes, 14
  - of Fallopian tubes, 14
  - of hymen (or "maidenhead"), 20
  - of mammary glands, 18
  - of ovaries, 16
  - of penis, 4
  - of prostate gland, 9
  - of scrotum, 5
  - of testicle, 5
  - of uterus, 14
  - of vagina, 13
  - of vulvovaginal gland, 21
  - of womb, 14
- Anemia, caused by abortion, 153
  - caused by excessive masturbation, 503
  - causing sterility, 584
  - chlorosis form of, 39
  - constitutional, not found in married, 40
  - in girls due to masturbation, 66
  - treatment of when associated with chlorosis, 613
- Anesthesia, sexual, 205, 545
  - caused by masturbation, 547
- Animals, menstruation in, 31
  - syphilis in, 275

Animalcules, amebic, 1  
 cause of syphilis, 274  
 sperm, 94  
 Answer, a woman's, 713  
 Anteflexion, of womb, causing menstrual disturbances, 609  
 Anteversion, of womb, causing menstrual disturbances, 609  
 Antiseptics, not used for birth control, 609  
 used by doctors to prevent infection, 522  
 Anus, as erotogenous zone, 23  
 Aortic disease, caused by syphilis, 292  
 Apoplectic strokes, none before middle life "if every man were straight," 434  
 Apoplexy, many deaths from due to syphilis, 528  
 Appendages, uterine, 15  
 absence of pain in shows gonorrhea is probably cured, 331  
 diseases of caused by gonorrhea, 325  
*Areoi*, the society of, 122  
 Army, United States, venereal disease-record of, 464  
 Art of understanding, 106  
 Arthritis, often means gonorrhea, 475  
 Asceticism, ancient notions of, 56  
 and altruism, 547  
 and chastity, 85, 543  
 desirable, 57  
 upholders of, 51, 53  
 Asexual reproduction, not possible in higher animals, 96  
 Asexualization necessitated by gonorrhea, 632  
 produces neuters, 5  
 Asexualized old maids, not authorities on continence, 502  
 Aspermia, cause of sterility, 510  
 Atavism, sexual appetite as example of, 587

Atony, of prostate, from interrupted coitus, 507  
 Atrophy, of female sex organs after "change of life," 607  
 of personality, from repressed sex impulse, 52  
 of testicles, 544  
 Australia, the "*mika*" operation of, 189  
 Autism, defeats altruism, 85  
 Autoerotism, 62  
 elimination of, 86  
 masturbation is one form of, 62, 71  
 normal in human beings, 65  
 not same as perversion, 65  
 Autopsy, showing no cause for death in abortion, 255  
 Azoospermia, causing sterility, 172  
 510

## B

Babies, beliefs of children as to origin of, 376  
 not nearly so many born dead, "if every man were straight," 432  
 Baby, where did it come from? 366, 376  
 "Bad cold idea," the, 530  
 Bagnio, only refuge for erring woman, 538  
 Balanitis, cause of, 336  
 consequences of, 336  
 treatment of, 336  
 Barrenness, or sterility, 94, 510, 583  
 due to abortion, 153, 257  
 Baths, at menopause, 220, 227  
 Betty and Bob, story of, 680  
 Bible, sexual dangers of, 491  
 Bibliography, 739  
 Biological standpoint, masturbation unnatural from, 72  
 Biology, determines correct time for coitus, 520  
 relation of sexual play in children to, 50  
 Birds, reproduction in, 398  
 Birth canal, anatomy of, 13

- Birth control, 140  
     are the methods for injurious?  
         142  
     or abortion, 150  
     Robert Ingersoll on, 154
- Births, multiple, 244
- Bladder, and generative organs,  
     most chronic diseases of would  
     disappear "if every man were  
     straight," 430
- Blame, where it belongs, 465
- Blind, very few children born, "if  
     every man were straight," 432
- Blindness, gonorrhea and syphilis  
     as cause of, 323, 328, 519  
     wild oats as cause of, 461
- Blood lost in childbirth, 33
- Blood vessels, diseases of greatly  
     lessened "if every man were  
     straight," 434
- Bloom, do not brush from fruit, 534
- Bluebeard, as Sadist, 26
- Books to read on sex hygiene, 750
- Breasts, anatomy of, 18  
     as erotogenous zones, 23  
     changes in from pregnancy, 234  
     number of, 19
- Brothel, empress as inmate of, 26  
     inmates of due to wild oats crop,  
         616  
     inmates of seduced, 588
- Brown, Mary, case of, 647
- Bugbear, the race suicide, 167
- Buried life, the, 366
- C
- Cadets, wiles of, 585
- Calculi, preputial, may cause im-  
     potence, 91
- Cancer, liable to occur in misplaced  
     testicles, 9  
     may be due to abortion, 256  
     not caused by birth control, 145,  
         146
- Canons, of decency, 73
- Capillary vessels, to become distend-  
     ed require congestion, plethora  
     or erethism, 33
- Castration, occasionally does not  
     cause impotency, 90  
     to eliminate undesirables, 568
- Catamenia, the, 30  
     relation of to impregnation, 592
- Cause for alarm lies elsewhere, 169  
     of balanitis, 336  
     of chancroid, 335  
     of gonorrhea, 317  
     of syphilis, 274
- Cautery, use of in diseases of  
     women, 599
- Celibacy, effects of on women, 570  
     birth control prevents, 158  
     no valid objections to, 471
- Centers, erotic, 590
- Cervix, disease of causes "the  
     whites," 612  
     inflamed, birth control methods  
         beneficial in, 145, 171  
     ulcers of from ungratified sexual  
         desire, 598
- Chancre, 277, 287
- Chancroid, cause of, 335  
     consequences of, 329, 336  
     manner of infection with, 335  
     prevention of, 335  
     treatment of, 336
- "Change of life," 218  
     in men, 478
- Child, heart-sounds of in pregnancy,  
     237  
     movements of, in pregnancy, 236
- Child-birth, outfit for, 245  
     too frequent exhausts woman's  
         body, 177  
     too frequent kills woman's spirit,  
         178
- Childless homes, fewer "if every  
     man were straight," 431
- Children, age of at first permanent  
     impressions of sex, 372  
     are they getting a square deal?  
         459  
     beliefs of as to origin of babies,  
         366, 376



- Children, diseased, few born "if every man were straight," 432  
 man has no right to injure his own, 574  
 mentally-defective, far fewer "if every man were straight," 433  
 needless mortality in, 542  
 specter of too many, 165  
 support parents in their old age, 175  
 too many, orthodox remedies for, 166  
 where to obtain sex education, 466
- Chlorosis, 39  
 absence of menses caused by, 37  
 marriage with, 39, 40  
 treatment of, 39
- Choice, freedom of, 108
- Chorea, obstacle to marriage, 99  
 occasionally justifies abortion, 251
- Cilia, of egg tubes, 15, 232
- Circumcision, advantages of, 188  
 extent of, 188  
 history of, 188
- "Clap," the, 317
- Cleanliness of sex organs, beneficial, 188
- Climacteric, 218  
 womb of little importance after, 14
- Clitoris, anatomy of, 18  
 as erotogenous zone, 22
- C. L. M., 714
- Closed womb, the, 604
- Cognate, ancient theology not—with modern, 81
- Cohabitation, proper frequency of, 573  
 purist's limitation of, 158
- Coitus, during menstruation, 202  
 during pregnancy, 203, 524  
 usual frequency of, 201, 519, 522
- Coitus, incompletus, 208  
 incompletus, evils of, 506  
 interruptus, 208
- Coitus, interruptus (or incompletus)  
 ill-effects of, 184, 208, 506, 507, 599  
 interruptus, as cause of impotence, 91  
 injuries during, 210  
 not for procreation, 200  
 painful, 203  
 prolongatus (or reservatus), 209  
 ill-effects of, 506
- Color sense, development of in adolescent girl, 557
- Commercialization, of sex impulse, 507
- Complement-fixation test must be negative before marriage of gonorrheic, 330
- Conception, time when it occurs, 585
- Conception, prevention of, 474  
 and the race suicide bugbear, 168  
 as regards specter of too-many children, 165  
 claimed to be against religion, 173  
 to be immoral, 174  
 to be injurious, 171  
 to be not absolutely sure, 172  
 to cause sexual excess, 173  
 to cause sterility, 172  
 will lead to divorce, 174  
 will lead to immorality, 170  
 contrasted with abortion, 268  
 diminishes venereal disease among married, 176  
 does not increase infantile mortality, 520  
 early methods of crude, 142  
 enormous benefits from for eugenics, 179  
 few cases showing necessity for, 180  
 improper methods of causing neurasthenia, 178  
 limitation of offspring by, 163  
 moral standards of those using, 175

- Conception, prevention would cause
    - early marriage, 176
    - would diminish prostitution in married life, 179
  - Congenital frigidity can be helped
    - but little, 624
    - morality not to be expected, 71
  - Congestion, menstrual, 33
    - of prostate and urethra often due to long engagements, 93
    - of urethra and prostate often causes impotence, 89
    - relieved by contraceptives, 171
  - Conjugal harmony, 116, 117
    - love, 118
    - rights, 107
  - Consanguineous marriages, asserted
    - children from mostly boys, 479
    - greatly strengthen unfavorable tendencies, 510
    - not necessarily injurious, 130, 501 588
  - Consequences, of balanitis, 336
    - of chancroid, 336
    - of gonorrhea, 321, 324, 327, 337
    - of syphilis, 284, 291
  - Constipation, common in pregnancy, 243
    - induced by children, 73
    - to be prevented with amenorrhea, 609
    - with "change of life," 220, 229, 608
    - with impotence, 564
    - with leucorrhea, 613
  - Consumption, as obstacle to marriage, 130
  - Consumptives, sexual excess in, 25
  - Continence, arguments against, 45
    - arguments for, 42
    - benefits of, 485, 489
    - false and true, 211
    - premarital, 471, 525
    - problem of, 48
    - sexual, 543
    - sexual who should discuss it? 502
  - Continence, unscientific and injurious for birth control, 144
  - Contraception, knowledge of beneficial, 179
    - laws against to be amended, 160
    - not the same as abortion, 167
  - Contraceptives, do not cause cancer, 146
    - not absolutely infallible, 195
    - not antiseptics, 145
    - not harmful, 142, 174
    - prevent resort to abortion, 154
  - Convulsions, in pregnancy, 244
  - Copulation, possible without rupture of hymen, 20
    - prospective wives to be instructed in, 594
  - Cord, umbilical, twists of, 620
  - Corner, down at the, 679
  - Corpora cavernosa, if blood does not accumulate in causes impotence, 575
    - lutea, formation of, 232
  - Courtesan, no other calling than possible, 538
    - the consumes much wealth, 523
  - Courtship, stress of, 115
  - Couvade*, the, 125
  - Cowper's glands, anatomy of, 12
    - mucus from, 190
  - "Critical period," 218
  - Cryptorchids, differ from subjects
    - with sexual anesthesia, 545
    - generally impotent, 90
  - Cytoplasm, from egg cell, 230
- D
- Dalliance, excesses in, 484
    - injurious if long continued, 552
  - Dancing, danger of, 473
  - Dangers of ignorance of self and sex, 596
  - Death, syphilis greatest known cause of, 460
  - Defecation, in children, with pleasurable sensation, 73
  - Defloration, importance of, 580

- "Defrauding," 208  
 Demimondaines, dress of, 514  
 Desires, comparative sexual of male and female, 24  
 Destiny of women, the, 120  
 Diet, at menopause, 220, 228  
 Dipsomania, contrasted with erotomania, 25  
 Diseased children, few born "if every man were straight," 432  
 Divorce, claimed that prevention of conception leads to, 174  
 "Doctor," quacks make one in 4 seconds, 348  
 Domestic animals, duration of pregnancy in, 239  
     masturbation in, 62  
 "Double Standard," of sexual morals, 437, 480, 559, 560  
     unfair, 532  
 Douches, beneficial in "change of life," 608  
     beneficial in "whites," 613  
     in female disorders from ungratified sexual desires, 599  
     use of after "periods," 37  
 Down at the corner, 711  
 Dramas, one of Life's little, 637  
 Dress, immodest, 487, 494, 514  
 Dropsy, in pregnancy, 177, 243  
     may require emptying of uterus, 251  
 Drunkenness, syphilis as cause of, 526  
 Duration of pregnancy, 237  
     of pregnancy, in domestic animals, 239  
 Dysmenorrhea, conditions in, 34  
     nature of, 38  
 Dyspareunia, cause of, 203
- E
- Earning capacity greater "if every man were straight," 435  
 Eclampsia, danger from averted by birth control, 180  
     may call for abortion, 264, 269  
     very dangerous, 244  
 Ed and Bess, story of, 669  
 Education, sex, at high school, 380  
     at home, 366, 371, 392  
     at school, 377  
 Edwards, Rev. Jonathan, family of, 98  
 Effete material, in menstruation, 34  
 Ego-ideal, contributions to, 74  
     specification of, 75  
 Egg, the human, development of, 230  
     enormous number of, 17  
     size of, 17  
 Eggs, enormous number of in tapeworms, 2  
     in white ants, 2  
 Egg-glands, anatomy of, 16  
 Egg-tubes, anatomy of, 14  
 Ejaculation, in psychic impotence, 576  
     premature, 577  
     produced by fetichism, 27  
 Embryo, vegetative life of, 254  
 Emissions, nocturnal, 552, 572  
     nocturnal, no danger from, 495  
 Endometritis, caused by abortion, 153  
 Endopsychic censorship, conscience in, 74  
 Engagements, long, 506, 551  
 Epididymis, the, 6  
 Epididymitis, causes sterility, 510  
 Epilepsy, caused by syphilis, 291  
     may cause satyriasis, 25  
     not due to masturbation, 64, 505  
     obstacle to marriage, 130  
     prevention of conception where children have, 185  
 Epispadias, usually causes sterility, 90  
 Epithelium, of vagina and uterus, absorption of semen by, 507  
 Erection, absent in psychic impotence, 575  
     mechanism of, 4  
 Erethism necessary to propel human egg, 33  
 Erotic centers, 590  
     fancies of adolescence, 480



- Eroticism, in female, at "change of life," 608  
 in female, from masturbation, 538
- Erotogenous zones, 71, 72, 78, 214  
 anus as, 23  
 breasts as, 23  
 clitoris as, 22  
 labia minora as, 22  
 lips of mouth as, 23  
 nipple as, 23  
 penis as, 22  
 skin as, 23  
 vagina as, 22
- Esthetics, 49, 74  
 and intercourse during menstruation, 520  
 and masculine beauty, 111  
 confused with morals, 87  
 spring from sex impulse, 103
- Ethical consideration of masturbation, 82
- Ethics, not affected by masturbation  
 in female, 48  
 of sex, 86  
 unprofessional, 471
- Eugenics, 97, 500, 568  
 aim of, 567  
 enormous benefits to from prevention of conception, 179
- Eunuchs, 41  
 not necessarily sexual anesthetics, 545  
 some individuals capable of intercourse, 90
- Exacerbate the conflict, moral admonitions serve only to, 81
- Excess, sexual, 202  
 as cause of impotence, 91  
 claimed to be possible with prevention of conception, 173
- Exercise, at menopause, 228
- Exhibitionists, as sexually aberrant, 27
- External secretions, 7
- Extramarital sexual intercourse, 59, 295  
 narrow-minded opponents of, 498  
 to prevent infection in, 345
- Eye, gonorrhea of, 532
- F
- Face, the masturbator's, 503, 601
- Fakes and quacks, 530
- Fallopian tubes, anatomy of, 14  
 infection of from gonorrhea, 531
- Families, unusually large, 140
- Fanatical over-moralizing on masturbation, 81
- Father, sins of the, 523
- Fatherhood, 122
- Fecund individuals not necessarily impotent, 566
- Fence or ambulance, 717
- Female, changes in at puberty, 29  
 disorders, unsatisfied sexual desires as cause of, 598  
 secondary sexual organs of, 18  
 sexual organs, 12, 411
- Fertilization, most favorable time for, 520  
 when ovule ready for, 134
- Fetichism, a form of sexual aberration, 27
- Feticide, 249  
 increasing, 253, 521
- Fetus, habitual death of, 251  
 nature of in womb, 619
- Fibroid tumor of womb, may necessitate abortion, 269
- "*Filles de joie*," edict against, 339
- Fimbriated end of egg tubes, 15, 33, 232
- Fishes, reproduction in, 396
- Fistula, may result from abortion, 255
- Fits, epileptic, as obstacle to marriage, 130
- Five dollars a week, 704
- Flatus, accidental passage of, 74  
 accumulation of from abstinence, 543

- "Floor man," of quacks, story of, 352
- Flowers, reproduction by, 395
- "Flowers, the," 31
- Foreskin, the, 4, 18
- Freedom of choice, 108
- Frequency, of coitus, 201
- of coitus, in married life, 519, 522
- of gonorrhea, 320
- of syphilis, 281, 307
- Fright, as cause of impotence, 92
- "Frigidity," sexual, 205, 488, 508, 509, 545
- in women, 576, 622
- Fruit, do not brush bloom from, 534
- Function, of nerves, disordered from masturbation, 484

## G

- Galton's theory of heredity, 99
- Gastralgia, in women, supposed to result from masturbation, 538
- Generative organs, the, 1
- of female, most operations on not needed "if every man were straight," 430
- Genitalia, the, 1
- children to be taught handling of is bad, 69, 535
- uncovering of by exhibitionists, 27
- Genito-urinary tract, irritation of in bride, 628
- Girl, adolescent, development of color sense in, 557
- what of the prodigal? 715
- Girls, approaching the threshold of womanhood, advice to, 193
- effect of masturbation in, 477
- how they are led astray, 585
- why they "go wrong," 537
- Glands, of human body, 7
- Gleet, consequences of in newly-married, 476
- marriage with, 476
- nature of, 320, 327
- resulting from treatment by quacks, 596
- Glossary, 720
- God-son, letter to a, 653
- Gonads (or sex-glands), the, 5
- Gonococcal salpingitis, fulminant, 629
- Gonococcus, the, causes gonorrhea, 317, 319
- Gonorrhea, cause of, 217
- causing blindness, 519, 532
- causing double salpingitis and oöphoritis, 632
- causing impotence, 89
- chronic, none "if every man were straight," 430
- consequences of, 321, 324, 327, 337
- course of, 319
- evil-effects of, 486, 536
- few facts about, 332
- frequency of, 320
- history of, 317, 453
- manner of infection with, 319, 324
- marriage with, 129, 329
- penalty for communicating, 492
- positively no intercourse during attack of, 334
- prevention of, 320
- recognition of, 317
- sterility due to, 322, 327, 331
- treatment of, 320
- Gonorrheal rheumatism, 475
- none "if every man were straight," 429
- Graafian follicle, failing to discharge ovule, 593
- nature and location of, 230
- "Green sickness," the, 39
- Groin, abscess in caused by gonorrhea, 333
- testicles may be situated at, 9
- Guerdon of the skilful wooer, 108
- Gumma from syphilis, 279
- Gynecologists, challenge to regarding birth control, 146

## H

- Habituation, to monogamy, 123
- Harlot and the nun, the, 710
- Harmony, conjugal, 116

- Health and sex, 496
- Heart disease, as obstacle to marriage, 130
- Heart-sounds of child, in pregnancy, 237
- Hedonism, selfish from youthful impurity, 483
- Hemorrhage, postpartum, 638
- Hemorrhoids, common in pregnancy, 243
  - facial appearance with, 503
  - "wet dreams" caused by, 573
- Hereditary syphilis, 280, 299
- Heredity, 99, 553
- Her house, the way to, 444
- Hernia, may cause impotence, 90
- Herpes, on genitals, 189
  - quacks excite alarm, 595
- Heterosexual aberrations, 27
- High school, sex education at, 380, 423
- History, of circumcision, 188
  - of gonorrhea, 317, 453
  - of marriage, 122
  - of prostitution, 339
  - of syphilis, 246, 453
- Hodgens, Dr. Isaac W., tells a healthy caller he has prostatitis, 355
- Holophilic instinct, the, 87
- Home, sex education at, 366, 371, 392
- Homologous twins, 245
- Homosexual aberrations, 27
  - in women, 78, 623
  - individuals, marriage of, 565
  - individuals, marriage no cure for, 504
- Honeymoon, sometimes a tragedy, 472
- "Hottentot apron," the, 13
- House, of secrecy, 450
  - the way to her, 444
- Hutchinson's teeth, 281
- Hybrids, Mendel's explanation of, 100
- Hydrocele, may cause impotence, 90
  - nature of, 190
- Hygiene, of menstruation, 37
  - of nuptial night, 593
  - of wedlock, importance of, 111
  - personal, results of ignorance of, 548
  - rapid increase of, 161
  - sexual, problem of, 416
  - sexual, Frau Marie Lischnewska's views on, 420
  - social, maxims of, xvii
- Hygienic, function of antiseptics, 145
  - measures in leucorrhea, 613
  - rearing of children, 257
  - sexual problem, 416
- Hymen (or "maidenhead"), anatomy of, 20
  - impeding coitus, 512
  - imperforate damming up menses, 605
- Hyperesthesia, sexual from masturbation, 478, 601
  - sexual relieved by masturbation, 570
- Hypertrophy of penis, causing impotence, 90
- Hypochondriacal ideas, caused by abstinence, 59, 217
  - from too-frequent emissions, 573
  - in men, caused by masturbation, 80, 567
  - in women, from sexual diseases, 541
  - in women, never caused by masturbation, 477
  - relation of to masturbation, 600, 601
- Hypoesthesia, in men, from masturbation, 478
- Hypospadias, causing impotence, 90
- Hysteria, arising at puberty, 29, 566
  - from imperforate hymen, 605
  - in men, false love in, 525
  - in women, from unsatisfied sexual desire, 599, 609



Hysteria, in women, generally due to disease of the generative organs, 548  
 in women not caused by masturbation, 505  
 may start at marriage, 472

## I

Inconoclast, masturbator not always an, 82

*Idée fixe*, in mother's marks, 621

Ignorance and innocence, or intelligence and virtue, 556  
 and venereal diseases, 504  
 some results of, 528

Illegitimate children, none "if every man were straight," 428

Immodest dress, 487

Immoral, prevention of conception claimed to be, 174

Immorality, alleged that limitation of offspring will lead to, 170

Impotence, causes of, 89, 484  
 due to sexual abstinence, 60

in men, 563  
 in women, 563  
 presenile and senile, 60  
 psychic, 575  
 treatment of, 93  
 varieties of, 88

Impotentia coeundi, 507

Impregnation, of human egg, time of, 592.

Impressions, maternal, 579, 585  
 prenatal, 579, 585

Incomplete copulation, 208

Industrial life richer, "if every man were straight," 435

Industry and venereal disease, 467

Inebriety, syphilis as cause of, 526

Infanticide, increase of, 254  
 of females, forbidden, 570  
 postnatal is murder, 253, 490

Infants, needless mortality in, 542

"Inflammatory disease, pelvic," 529

Inhibit sexual impulse, to, 86

Inhibition, of non-moral stage in infancy, 74

of sexual control by alcohol, 581  
 of sexual development, 592

Injuries, during coitus, 210

Injurious, alleged prevention of conception is, 171

Innocence and ignorance, or intelligence and virtue, 556

Innocent and pure, to really, all things are pure, 563, 571  
 infection of, 502

Insanity, less by half "if every man were straight," 433

Intellectual pursuits, as cause of impotence, 93

Intelligence and virtue, or ignorance and innocence, 556

Intense desire, causing impotence, 93

Intercourse, frequency of, 201, 519, 522, 573

positively none during attack of gonorrhea, 334

suitably regulated, affords sexual satisfaction, 144

Intermenstrual period, gonococci absent in, 331

Interrupted copulation, 208

Internal secretion, of ovaries, 18  
 of testicles, 8

Interstitial gland, nature of, 5

Intrauterine existence, time when fetus becomes separate being, 250

Irene Larrabee West, case of, 631

Iritis, in nurse, contracted from syphilitic child, 305

## J

Jack-the-clipper, 27

Jealousy in women, 550

Joints, diseases in from gonorrhea, 321

Joke, the sex, 578

Jukes family, the, 98

## K

Karyoplasm of human egg, 230

## L

**Labia majora**, 13  
     **minora**, 13  
     **minora**, as erotogenous zones, 22  
**Laceration**, of hymen, from awkward coitus, 594  
     of womb from abortion, 255  
**Lactation**, as cause for polygamy, 123  
     increased blood supply during, 33  
     sexual desire during, 23  
     some morbidity attending, 178  
**Lactiferous ducts**, route of, 19  
**Layette**, song of the, 712  
**Leader**, a lost, 634  
**League**, Voluntary Parenthood, 158  
**Lesbian love**, form of sexual aberration, 27  
**Letter to a god-son**, 653  
**Leucorrhea**, birth control methods  
     beneficial in, 145  
     cause of, 611, 612  
     caused by abortion, 257  
     causes weakness of the sexual organs, 609  
     may cause sterility, 584  
     nature of, 611  
     supposed to result from masturbation, 538  
     treatment of, 613  
**Libidinous**, all men not intensely, 525  
     impulses, repressed, 83  
     woman, very, is pathological, 546  
**Libido**, sexual, 24  
     intense, causes premature ejaculation, 93  
     lack of causes impotence, 88  
     lack of not cured by marriage, 504  
     spontaneous resolution of, 591  
**Lie of the wild oats**, 614  
**Life**, and love, 101  
     length of one-third higher "if every man were straight," 435  
     the buried, 366  
     wonderful story of, 392  
**Life's little dramas**, one of, 637

**Limitation of offspring by prevention of conception**, 163  
**"Lips," of female generative organs**, 13  
     of mouth, as erotogenous zones, 23  
**Lischnewska**, Frau Marie, views on sexual hygiene, 420  
**Lives**, why they are wrecked, 109  
**Locomotor ataxia**, danger of from syphilis, 312  
     due to syphilis, 284, 481  
     none "if every man were straight," 434  
**Long engagements**, 506, 551  
**Lost leader**, a, 634  
**"Lost manhood,"** 191, 361  
     quack, the, 492  
**Love**, and life, 101  
     and the sex instinct, 497  
     impulse to, 102  
     when men, 112

## M

**Mack**, Judge Julian W., views on sex education, 386  
**Macrobiotic individuals in the future**, 61  
**"Maidenhead," (or hymen)**, anatomy of, 20  
**Male**, reproductive organs of, 3, 413  
**Mammary glands**, anatomy of, 18  
**Man**, desire of sexual change in, 481  
     has no right to injure his own children, 574  
     polygamous sexual instinct in, 586  
     "were straight, if every," 427  
*Mariages de convenance*, not stable for passionate natures, 584  
     reasons for unhappiness of, 128  
**Marriage**, age for, 117, 126  
     and gonorrhea, 329  
     and perverted sexual instinct, 565  
     and syphilis, 298, 311  
     as an art, 117  
     best time for, 199  
     early, encouraged by prevention of conception, 176

- Marriage, history of, 122  
 lack of sexual harmony in, 498  
 medical examination before, 525  
 no license for without certificate  
 of freedom from transmissible  
 disease, 131, 133  
 not a cure for masturbation, sem-  
 inal emissions, frigidity, etc.,  
 504  
 of chlorotic women, 39, 40
- Marriages, consanguineous, 130, 501,  
 588  
 obstacles to successful, 129  
 requisites for satisfactory, 126
- Married, venereal disease is les-  
 sened by prevention of concep-  
 tion, 176
- Married life, benefit of, 139  
 consequences of, 501  
 early, caution in, 489  
 early, difficulties in 561  
 prostitution in, diminished by pre-  
 vention of conception, 179  
 quicksands of, 119  
 sexual aspect of, 512, 513
- Married men paying attention to  
 girls and other women, 495
- Marry, who shall? 510
- Mary Brown, case of, 647
- Martins, case of, 680
- Masculine standards, 103
- Masochism, a form of sexual aber-  
 ration, 26  
 individuals with marrying, 565
- Massage, at "change of life," 220  
 in female complaints, 599
- Masturbation, 62, 517  
 a cause of sexual anesthesia, 547  
 among savages, 63  
 as cause of impotence, 89  
 causes hyperesthesia in women,  
 478  
 causes hypoesthesia in men, 478  
 cure of, 562  
 effect of in girls, 477  
 effects of exaggerated, 484, 498,  
 505, 538, 552, 566
- Masturbation, effects of not to be  
 misrepresented, 558  
 ethical considerations of, 82  
 evil-effects of, 63  
 frequency of, 63, 477  
 habit of, 66  
 in animals, 62  
 in birds, 62  
 in the female, 62  
 in the male, 65  
 none "if every man were straight,"  
 427  
 not injurious, 487  
 pathology of, 77  
 prevention of, 68  
 psychology of, 70  
 relation of to hypochondriasis, 600  
 visits to prostitutes not justified  
 to prevent, 599
- Masturbator's face, the, 597, 564
- Maternal impressions, 246, 579, 585
- Matriarchate, custom of, 122
- Maxims of social hygiene, xvii
- Meatus urinarius, location of, 4, 18,  
 65
- Medical examination previous to  
 marriage, 525  
 institutes and quacks, 595
- Men, "change of life" in, 478  
 impotence in, 563  
 love, when, 112
- Mendel's explanation of hybrids, 100  
 theory of heredity, 100
- Menopause, the, 606  
 age of, 218, 221  
 disturbances at, 218, 223  
 symptoms of, 218, 220  
 treatment of, 220, 227
- Menorrhagia, 37
- Menses, the, 30
- Menstrual discharge, the, 31
- Menstruation, absence of, 37  
 age of beginning, 34  
 care during, 37  
 coitus during, 202  
 defective, 608  
 disturbances during, 36



# A LIST

## OF SOME OF THE

### CRITIC AND GUIDE PUBLICATIONS

Treatment of Sexual Impotence .....\$4.00	The Critic and Guide, Monthly, single copies 25 cents; a year..... 2.00
Woman: Her Sex and Love Life ..... 3.00	Woman from Bondage to Freedom, by Ralcy Husted Bell..... 2.50
Married Life and Hap- piness or Love and Comfort in Marriage. 3.00	Uncontrolled Breeding, or Fecundity vs. Civ- ilization. A d e l i n e More .....\$1.00
Sexual Problems of To- day ..... 2.00	Sex Morality and Ner- vousness, by Prof. Freud ..... .25
Sex Knowledge for Men and Boys ..... 2.00	The Venereal Peril, by Wm. L. Holt, M. D. .25
The Limitation of Off- spring by the Preven- tion of Conception... 1.50	The Social Evil, by Wm. L. Holt, M. D..... .15
Small or Large Fami- lies. By Drysdale and Havelock Ellis ..... 1.50	The Hunter, by Olive Schreiner, with an introduction by Dr. Robinson, entitled, A Page from My Life, paper 25 cents..... .50
Never Told Tales..... 1.50	Scientific Medicine vs. Quackery ..... .10
Stories of Love and Life 1.50	Pioneers of Birth Con- trol. Dr. Victor Rob- inson ..... 1.00
A Clergyman's Son and Daughter ..... 1.00	
Eugenics and Marriage. 1.50	
Sex Knowledge for Women and Girls... 1.50	
The Sexual Crisis. Meisel-Hess ..... 3.00	
Population and Birth Control. A sympos- ium ..... 3.00	

Books not otherwise marked are by Dr. William J. Robinson.

### THE CRITIC AND GUIDE

**12 Mt. Morris Park West**

Book Dept.

**New York City**



Menstruation, duration of, 35  
 in animals, 31  
 information to be given, 490  
 painful, 38  
 process of, 30  
 profuse, 37, 38  
 stoppage of in pregnancy, 234  
 "vicarious," 38

Mental, (or psychic) masturbation, 70

Mentally-defective, children, far fewer "if every man were straight," 433  
 most prostitutes are, 518

Metroperitonitis, from abortion, 255

Metrorrhagia, 38

Micturition, increased frequency of, 628  
 pleasurable sensation with in children, 73

"Mika" operation (of Australia), the, 189

Milt, (seminal fluid) of fishes, 2

Miscarriage, 240  
 early in pregnancy, 490  
 less by half "if every man were straight," 432

Misery and suffering, untold, no more "if every man were straight," 436

Mock modesty, menace of, 460

Modesty, and prudery, 363  
 origin of, 363

Monandrous, women are naturally, 262

Monkeys, masturbation in, 62  
 menstruation in, 31

Monogamous animals and birds, 103  
 marriages, found in higher states of civilization, 124  
 marriages less numerous than polygamous, 24  
 women more so than men, 170, 481

Monogamy, 124

Monthly "periods," the, 31

Moral standard of those using preventives of conception, 175

Morals, sexual, "double standard" of, 437  
 "single standard" of, 211

Morbidity, extreme with sexual aberration, 565  
 of gestation, labor, lactation and puerperium, 178

Mother to a son, a, 716

Motherhood, 122  
 voluntary, 147

"Mother's marks," 246, 579, 585

Motivation, much depends on, 84

Mucous membrane, state of in painful menstruation, 34

Mucus, discharge of with menses, 30, 31  
 prevents clotting of blood, 34

Multiple births, 244

Myositis, often caused by gonorrhea, 475

## N

Nephritis, caused by too-frequent childbearing, 178  
 may necessitate abortion, 251, 269

Neuralgia, in pregnancy, 243

Neurasthenia, caused by improper methods of birth control, 178  
 from masturbation, 552  
 from sexual excesses, 515  
 often starts in adolescence, 566  
 sexual, from abstinence, 59  
 sexual, from treatment by quacks, 472  
 sexual, illicit relations not justified in, 505

Neurosis, at "change of life," 606  
 from disorders of the sexual organs, 153  
 from repressed sexual instinct, 87

Neurotic individuals, masturbation common in, 498  
 mothers, 166  
 nation, abstinence will make a, 46  
 people, very moral, 81



Neurotic individuals, 217  
 women not always sexual anesthetics, 546  
 Neuter individuals, produced by asexualization, 5  
 produced by gonorrhea, 633  
 Nipple, as erotogenous zone, 23  
 No one had told her, 709  
 Nocturnal emissions, 572  
 alarm concerning, 500  
 no danger from, 495  
 Nun and the harlot, the, 678  
 Nuptial chamber, the tragedy of, 534  
 night, hygiene of, 592  
 Nurses and infants, transmission of syphilis between, 305  
 Nymphæ, injuries of during coitus, 210  
 Nymphomania, a form of sexual aberration, 25  
 at "change of life," 608  
 supposed to result from masturbation, 53

## O

Obscurantism, policy of regarding sex education, 418  
 Offspring, limitation of by prevention of conception, 163  
 Omentum, disease of from gonorrhea, 529  
 Onanism, differs from masturbation, 62  
 to prevent conception, 144, 208  
 "One-child sterility," 95  
 Oneida Community, the, sexual customs of, 209  
 Oöphoritis, double from gonorrhea, 632  
 Ophthalmia, caused by gonorrhea, 323, 328, 523, 532  
 Orgasm, absence of in women, 509  
 lack of in wife, 207  
 later in women, 598  
 natural and unnatural, 506  
 Orgiastic self-righteousness, fanatic, 85

Orthodox remedies for too many children, 166  
 Os, adhesions of from abortion, 255  
 closure of, 585  
 Outfit for child-birth, 245  
 prophylactic, 539  
 Outline for sex education in high schools, 382  
 Ovaries, anatomy of, 16  
 Ovaritis, from gonorrhea, 325  
 Oviducts, anatomy of, 14  
 Ovulation, includes menstruation, 30, 34  
 interrupted by lactation, 123  
 process of, 30  
 Ovules, number of, 17, 151  
 size of, 18  
 Ovum, development of, 31, 230  
 time of impregnation of, 593  
 Ozena, many cases of due to syphilis, 292

## P

Painful intercourse, 203  
 menstruation, 38  
 Pantagamy, (coitus reservatus), 209  
 Paralytic strokes, none before middle life "if every man were straight," 434  
 Parenthood League, Voluntary, 158  
 Parents, ignorance of, 554  
 supported by children in old age, 175  
 wrong behavior of regarding masturbation in children, 67  
 Paresis, absolutely none "if every man were straight," 433  
 danger of from syphilis, 312  
 from "wild oats," 616  
 masturbators threatened with, 80  
 Paresthesia, from unsatisfied libido, 599  
 Parturition, blood lost in, 33  
 when dangerous, 251  
 Patriarchate, custom of, 122  
 Pathological condition of very libidinous woman, 546

- Pathology, habit determined by  
 compulsion of, 81  
 of masturbation, 77  
 sexual, physician's ignorance of, 504  
 sexual, teachers must know, 421
- Pelvic ailments, serious from abortion, 153  
 "inflammatory disease," 529
- Pelvis, diseases of from abortion, 255  
 of female, crowded with organs, 609
- Penis, anatomy of, 4  
 as erotogenous zone, 22  
 conditions of causing impotence, 90
- Perineum, injury of from awkward coitus, 210
- Periodicity, of menstruation, 31  
 of sexual desire in women, 24
- "Periods, the," 31
- Peripheral irritation of psychosexual organism, 547
- Peritonitis, gonorrheal, death from, 509  
 may be caused by coitus in pregnancy, 203  
 often caused by gonorrhea, 325  
 septic from abortion, 639
- Pernicious anemia, may necessitate abortion, 251
- Personal hygiene, results of ignorance of, 548
- Perversion, sexual, forms of, 27  
 often due to fear of pregnancy, 170
- Perverted sexual instinct and marriage, 565
- Phantasy, sexual, sense of chastity offended by, 77
- Philosophic females, as regards  
 "change of life," 219  
 persons, may practice abstinence, 47  
 questions, not all solved as yet, 258
- Phimosis, cause of, 191  
 may cause impotence, 91  
 may give rise to frequent emissions, 573
- Physiologic changes in women at any age, 127
- Physiology of reproductive organs, 22  
 of sex ignored by physicians, 504
- Pimples, 361
- Placenta, expulsion of, 244
- Plethora, necessary to distend capillaries, 33
- Pollutions, a natural outlet, 58, 75  
 marriage not cure for, 504  
 "nocturnal," 40  
 not apt to cause impotence unless excessive, 89
- Polyandry, nature of, 124  
 not so common as polygamy, 24  
 said to produce more boy-babies, 479  
 women not free from tendency to, 123
- Polygamous sexual instinct in man, 586
- Polygamy, 125  
 ancient prerogative of man, 560, 586  
 more common than monogamy, 24  
 widespread, 123
- Pornography, Southern nations less inclined to, 365
- Postnatal infanticide is murder, 253, 490
- Postpartum hemorrhage, 638
- Potentia coeundi, causing sterility, 135  
 lessened by abstinence, 60
- Potentia senilis, not Utopian, 61
- Power, sexual, 555
- Precocious appearance of sexual power, 556  
 arousing of erotogenous zones, 71  
 excess in masturbation, 547  
 masturbators, few hypochondriacs among, 601  
 menstruation, 30, 35

- Pregnancy, 230  
 care during, 241  
 coitus during, 203, 524  
 convulsions in, 244  
 disorders during, 241  
 dropsy in, 243  
 duration of, 237  
 duration of in domestic animals, 239  
 neuralgia in, 243  
 signs of, 233  
 superstitions of, 618  
 swollen veins in, 243  
 table for calculating duration of, 238  
 vomiting in, 242
- Premature labor, 240
- Prepuce, of female, 18  
 of male, 4  
 removal of, 188
- Preputial adhesions, 188  
 calculi, 91
- Prevention of chancroid, 335
- Prevention of conception, 474  
 and the race suicide bugbear, 168  
 as regards specter of too many children, 165  
 claimed to be against religion, 173  
 to be immoral, 174  
 to be injurious, 171  
 to be not absolutely sure, 172  
 to cause sexual excess, 173  
 to cause sterility, 172  
 will lead to divorce, 174  
 will lead of immorality, 170  
 contrasted with abortion, 268  
 diminishes venereal disease among married, 176  
 does not increase infantile mortality, 520  
 early methods of crude, 142  
 enormous benefits from for eugenics, 179  
 few cases showing necessity for, 180  
 improper methods of causing neurasthenia, 178  
 limitation of offspring by, 163
- Prevention of conception, moral standards of those using, 175  
 would cause early marriage, 176  
 would diminish prostitution in married life, 179
- Prevention of gonorrhea, 320  
 of syphilis, 281, 294
- Preventives of conception, moral standard of those using, 175
- Price he paid, the, 702
- Primo concubitu*, caution at, 481
- Prodigal girl, what of the? 715
- Profuse menstruation, 38
- Prolapsus causing menstrual disturbances, 609
- Promiscuity, preceding marriage, 122
- Propagation of offspring, a secondary consideration, 557  
 of undesirable characters, prevention of, 568
- Prophylactics, against venereal disease, 47
- Prophylactic outfits, providing of, 539
- Prophylaxis of venereal diseases, 483
- Prostate gland, anatomy of, 9  
 a sexual organ, 480  
 congestion of often causes impotence, 89, 215  
 diseases of as cause of impotence, 91  
 enlarged, from disease not old age, 480
- Prostatitis, due to gonorrhea, 531  
 quack tells healthy man he has, 355
- Prostatorrhea, 191  
 mistaken for seminal emissions, 41
- Prostitutes, most are mental-defectives, 518  
 visits to not justified for masturbation and neurasthenia, 505
- Prostitution, 444, 507  
 and segregation, 339



- Prostitution, causes underlying, 340, 578, 584  
 history of, 339  
 in married life, diminished by prevention of conception, 179  
 none "if every man were straight," 427  
 source of, 483
- Prudery, 515  
 absence of in Italy, 365  
 and modesty, 363  
 doing great damage, 493  
 examples of, 363  
 responsible for immorality, 365  
 some results of, 528
- Prurient children, 420  
 college women, 515  
 school, learning in, 87
- Pseudofrigidity, 624
- Pseudophysiology, pernicious, 486
- Psyche, injury to from coitus, 581
- Psychic impotence, 575  
 masturbation, 70  
 symptoms at "change of life," 606
- Psychoinfantilism, 592
- Psychologists consider men also may have "change of life," 478
- Psychology of masturbation, 70  
 of reproductive organs, 22  
 of sex instinct slighted by physicians, 504  
 shows autoerotism is normal, 64  
 the newer, 108
- Psychoneurosis, masturbation causes, 71
- Psychopathologic condition of the sexual impulse, 81  
 subjects, masturbators, as, 600
- Psychosexual life of child, 74
- Psychosis may cause sexual anesthesia, 546  
 may develop at "change of life," 606
- Psychotic old maids, 166
- Puberty, age of, 28, 152  
 changes in females at, 29  
 in males, 30
- Puberty, instruction for boys and girls at, 480
- Puericulture, teachers should be trained in, 423
- Puerperal fever causes "one-child sterility," 91  
 insanity, may necessitate abortion, 264  
 septicemia, from intercourse during pregnancy, 203
- Puerperium, some morbidity in, 178
- Pure, to the all things are pure, 563, 571
- Q
- Quack, menace of, 462  
 the "lost manhood," 492  
 the unspeakable, 602
- Quacks, 495-499  
 aid of tells of horror-chambers, 347  
 and fakes, 530  
 and medical institutes, 595  
 and their methods, 346  
 former interpreter for makes confession of the system used, 351  
 make a "doctor" in 4 seconds, 348  
 manager of tells how dupes are ruined, 350  
 protection of boys from, 511
- Quadruplets, 244
- "Quickening," time of, 236
- Quicksands of married life, 119
- R
- Race suicide bugbear, the, 167
- Râle holes, inmates of due to wild oats crop, 616
- Rape, by subjects with satyriasis, 25  
 impossible with Hottentot apron, 13  
 on brides, 489, 534, 595
- Recognition, of gonorrhea, 317  
 of syphilis, 317
- Rectum, gonorrheal abscesses bursting into, 529  
 presses on the womb, 610
- Reforming women, 537

- Religion, prevention of conception claimed to be against, 173
- Remedies, orthodox, for too many children, 166
- Reproduction, in general, 1  
     in animals, 3  
     in birds, 2, 398  
     in fishes, 2, 396  
     in flowers, 395  
     in insects, 2  
     in tapeworms, 2
- Reproductive and sexual functions, not synonymous, 607  
     organs of female, 12, 411  
     of male, 3, 413  
     organs, physiology and psychology of, 22
- Retching, in pregnancy, 234
- Rheumatism, and gonorrhea, 475
- Retroflexion of womb, causes disturbed menstruation, 609
- Retroversion of womb, causes disordered menstruation, 609
- Rose and Edward, story of, 628
- Roués, penitent do not make the best husbands, 614
- Rupture, may cause impotence in male, 90
- Rut, after in animals sexual desire of male abolished, 123  
     of animals practically identical with human menstruation, 232

## S

- Sadism, a form of sexual aberration, 26  
     exaggerated accounts of, 511  
     marriage of males with, 565
- "Safe," or sterile period, 475
- Salpingectomy, to prevent propagation of undesirables, 575
- Salpingitis, causes sterility, 584  
     double, from gonorrhea, 632  
     from gonorrhea, 325, 332  
     fulminant gonococcal, 629  
     gonorrheal, death from, 509
- Sapphism, a form of sexual aberration, 27
- Satyriasis, a form of sexual aberration, 25
- Satyrs, debauchery by lawless, 561
- School, sex education at, 377, 423
- Scrotum, anatomy of, 5
- Secondary manifestations of sex, 30
- Secretions, external, 7  
     internal, 8, 413
- Seducer, the, and his conscience, 587
- "Seed," the male, 8, 413  
     absence of, 331  
     contains cause of syphilis, 275  
     unable to reach egg, 94
- Segregation, and prostitution, 339  
     arguments for and against, 342
- Self-abuse, 62
- Self and sex, dangers of ignorance of, 596
- Semen, of male, 8  
     absence of, 331  
     contains cause of syphilis, 275  
     unable to reach egg, 94
- Seminal emissions, 40, 495, 552  
     frequency of, 41  
     prevention of, 41
- Seminal fluid, nature of, 8
- Senile impotence, 60, 91
- Sensibility, sexual, of woman, 591
- Sensuality, dormant in children, 28  
     increase of, 251
- Sepsis, causing one-child sterility, 95  
     from abortion, 152, 197  
     puerperal, from intercourse during pregnancy, 203
- Sex, age of first permanent impressions regarding, 392  
     alarms, 189  
     and health, 366, 371, 496
- Sex education, 392, 442, 450, 472, 476, 478, 482, 485, 499, 508, 511, 516  
     education, methods of, 535  
     education, where it should begin, 464
- Sex facts for female, 28  
     for male, 188  
     for married, 199
- Sex ignorance, results of, 566
- Sex immorality, 211

- Sex impulse, commercialization of, 507  
 repression of injurious, 474
- Sex instinct, and love, 497
- Sex joke, the, 578
- Sex, predetermination of, 479
- Sex, secondary manifestations of, 30
- Sexes, proportion of born in U. S., 96
- Sexologists, need for, 541  
 views of on masturbation, 67, 68
- Sexology, specialists in, 67
- Sexual aberrations, 25  
 abstinence, 49, 543  
 abstinence, Bloch's views on, 53  
 and reproductive functions not synonymous, 607  
 anesthesia, 205, 545  
 anesthesia, caused by masturbation, 547  
 anesthesia in women due to masturbation, 78  
 anesthesia, may last till puberty, 72  
 anesthesia, rare in men, 208  
 continence, 543
- Sexual craving, libido, urge, 24  
 desire, unsatisfied as cause of female disorders, 598  
 desires, comparative of male and female, 24
- Sexual excess, 25, 202  
 excess, as cause of impotence, 91
- Sexual excitement in women, 536, 540  
 frigidity, 488, 508, 509
- Sexual hygiene, Frau Marie Lischnewska's views on, 420  
 problem of, 416
- Sexual ignorance, 509
- Sexual impotence, 88
- Sexual instinct, perverted, and marriage, 565  
 instinct, polygamous, in man, 586
- Sexual insufficiency, 88
- Sexual intercourse, frequency of, 573
- Sexual intercourse, during pregnancy, 203, 524
- Sexual morals, "double standard" of, 437  
 "single standard" of, 211
- Sexual offenders, social ostracism of, 549
- Sexual organs, of female, 12, 411  
 of male, 3, 413  
 organs, secondary found in female, 18
- Sexual perversion, 27  
 may arise from abstinence, 46  
 not autoerotism, 65
- Sexual power, 555
- Sexual reproduction, advantages of, 96
- Sexual sense, the, 546
- Sexual sensibility of woman, 591
- Sexual tabus, 479
- Sexual tension, 75
- Sexuality and alcohol, 581
- "Shingles," on genitals, 189
- Signs of pregnancy, 225-233
- "Single standard," of sexual morals, 211
- Sins of the father, 523
- Skin, as erotogenous zone, 23
- Smegma, accumulation of, 91, 188
- Social hygiene maxims, xvii
- "Soft" sore, the, 335
- "Softening of brain," absolutely none "if every man were straight," 433
- "Solitary vice," 62
- Somatic cells, formation of body by, 231
- Son, a mother to a, 716
- Song of the layette, 712
- Specter of too many children, 165
- Sperm, 8  
 escape of apart from coitus, 191  
 life-giving principle of semen, 152  
 wasted in Onanism, 209
- Spermatorrhea, 191  
 marriage no cure for, 504



- Spermatozoa, enormous number of, size of, 8
- Spiral, the "pale" as cause of syphilis, 274
- Spirochæta pallida*, cause of syphilis, 274
- Standard, "the single," 211  
the unfair double, 437, 48, 559, 560
- Standards, masculine, 103
- Sterile or "safe" period, the, 475
- Sterility, or barrenness, 94, 510, 583  
about one-third of cases of due to gonorrhea, 324  
alleged to be caused by limitation causes of, 94  
of offspring, 172  
from gonorrhea, 322, 327, 331  
not always due to wife, 510, 584  
not due to birth control, 146  
prevented by birth control, 146  
wild oats as cause, 462
- Sterilize outfit for childbirth, to, 245  
utensils used by subjects with gonorrhea, 315
- "Stones, the," anatomy of, 5
- Stork story, the, 542
- Story of a Lost Leader, 634  
Betty and Bob, 680  
Ed and Bess, 669  
Irene Larrabee West, 631  
Mary Brown, 647  
Rose and Edward, 628  
The Brannigans, 641  
The Martins, 689
- "Straight, if every man were," 427
- Stress of courtship, the, 115
- Stricture, as cause of impotence, 89  
from gonorrhea, 90, 322, 327, 531  
organic, none "if every man were straight," 430
- Subinvolution of womb from abortion, 257
- Suffering and misery, untold no more, "if every man were straight," 436
- Suicide, race, the bugbear of, 167
- Superstitions of pregnancy, 618
- Suppositories, antiseptic, 330  
for leucorrhea, 613
- Sweany Co., The Old Dr., discover varicocele in a healthy individual, 357
- Syncope, death from following abortion, 255
- Synovitis, suppurative, often follows gonorrhea, 475
- Syphilis, 272, 717  
a few facts about, 313  
a problem of the nations, 284  
and marriage, 129, 298, 311  
as cause of children's death, 488  
as cause of inebriety, 526  
cause of, 274  
causing murder and suicide, 641  
consequences of, 284, 291, 528  
course of, 276, 286  
danger of locomotor ataxia or paresis from, 312  
frequency of, 281, 307  
greatest known cause of death, 460  
hereditary, 280  
history of, 246, 453  
incubation period of, 276  
manner of infection with, 275, 286  
penalty for communicating, 492  
prevention of, 281, 294  
recognition of, 282  
sad case of death from, 634  
stage one of, 277, 287, 463  
stage two of, 277, 287, 463  
stage three of, 279, 287, 288, 463  
treatment of, 284
- T.
- Table for calculating duration of pregnancy, 238
- Tabu on certain animals as food, 420  
on subject of sex, 73
- Tabus, sexual, 479
- Tachycardia, 507
- Tampons in leucorrhea, 613

Tapeworms, enormous number of eggs in, 2

*Tedium vitæ*, from frequent emissions, 573

Tetanus, may result from abortion, 152

Testicle, anatomy of, 5  
conditions of causing impotence, 90  
swelling of from gonorrhea, 531

Thyroid gland, changes in at puberty, 30  
disease of may cause frigidity in women, 577

Time, movement behind clock of, 466

Too frequent childbirth exhausts woman's body, 177  
kills woman's spirit, 178

Torsion of penis, as cause of impotence, 90

Training camp activities, commission on, 459

Traumatic suggestion, resulting from masturbation, 80

Treatment of balanitis, 336  
of chancroid, 336  
of chlorosis, 39  
of gonorrhea, 320  
of leucorrhea, 613  
of menopause, 220  
of pregnancy, 241  
of syphilis, 284

"Trial marriages," 125

Tribadism, form of sexual aberration, 27

Triplets, 244

Tuberculosis, (pulmonary) as obstacle to marriage, 130

Tumescence, favored by kissing, 590  
necessary for conjugation, 515  
slower in women, 536

Tumescent state, need of, 515

"Twilight sleep," best form of, 622

Twins, 244, 245

U

Ubiquity of syphilis, 289

Understanding, art of, 106

Underworld, the, 706

"Unwell, being," 31

Uranism, a form of sexual aberration, 27

Urge, sexual, 24

Urethra, congestion of causing impotence, 89, 215

Urethritis, from gonorrhea, 317  
man must be free from before marriage, 329

Urethrorrhea, nature of, 190  
from gonorrhea, 317  
mistaken for seminal losses, 41

Urinary channel, of female, 18  
of male, 4

Uterine fistula, from abortion, 255

Uterus, anatomy of, 14  
of little importance after "change of life," 14

V

Vagina, anatomy of, 13  
as erotogenous zone, 22

Vaginismus, 204

Varicocele, 189  
as cause of impotence, 91  
healthy man told by quack he has, 357  
not often cause of impotence, 91

Vas deferens, anatomy of, 6

Vasectomy, 184, 575

Veins, swollen, in pregnancy, 243

Venereal diseases, and ignorance, 504  
and industry, 467  
court decisions inflicting penalties, 492  
damage caused by, 522  
in married, diminished by prevention of conception, 176  
menace to health and efficiency of American people, 481  
need treatment by physician, 485

Venereal diseases, no compromise with, 527  
     none "if every man were straight," 429  
     prophylactics, 483  
     record of army, 464  
     society's attitude toward, 474  
 Venereal taint, the, 526  
 Venereal warts, 509  
 Vesical fistula from abortion, 255  
 "Vicarious" menstruation, 38  
 Vice, chief cause of, 568  
 Virginity, results of suppression of sex impulse during, 123  
 Virtue and intelligence, or ignorance and innocence, 556  
 Viscid contents of sac in painful menstruation, (dysmenorrhea), 34  
 Vitelline membrane of human egg, 230  
 Vitiating lymph, cast off in painful menstruation, (dysmenorrhea), 34  
 Voluptuous preoccupation, conflict of with curiosity, 73  
     sensations, arise in erotogenous zones, 71  
     sensations, none with sexual excess, 602  
     sensations, rare before puberty, 72  
 Voluptuousness, created by artificial excitement, 515  
 Vomiting, in pregnancy, 242  
 Vulva, passage of eggs to, 31  
 Vulvovaginal gland, anatomy of, 21

## W

Warts, venereal, 191  
 Wassermann test for recognizing syphilis, 282  
     must be negative before marriage, 312  
     not always resorted to, 137  
     shows syphilis is very common, 304

Waste, needless of little lives, 542  
 "Waterbrash" in pregnancy, 243  
 Wedding night, the, 199  
 "Wet dreams," 40  
 What of the prodigal girl? 683  
 When men love, 112  
 Where did the baby come from? 712  
 White ants, enormous number of eggs in, 2  
 "Whites, the," 611  
     birth control methods beneficial in, 145  
     may cause disordered menstruation, 609  
     may cause sterility, 584  
 Who would blame her—would you? 641  
 "Why girls go wrong," 537  
 Why lives are wrecked, 109  
 Wild oats, 701  
     as cause of blindness, 461  
     as cause of sterility, 462  
     lie of the, 614  
     reapers of, 461  
 "Withdrawal," 208  
     as cause of impotence, 91  
 Woman, body of exhausted by too frequent childbirth, 178  
     spirit of killed by too frequent childbirth, 178  
     the worn-out, 677, 709  
 Woman's answer, a, 713  
 Woman's body, exhausted by too frequent childbirth, 178  
     spirit, killed by too frequent childbirth, 177  
 Womanhood, advice to girls approaching the threshold of, 193  
 Womb, anatomy of, 14  
     diseases of from gonorrhea, 322  
     enlargement of in pregnancy, 234  
     the "closed," 604  
 Women, destiny of, 120  
     effects of celibacy on, 570  
     frigidity in, 576, 622  
     impotence in, 563



Women, not so difficult to be pure  
    "if every man were straight,"  
    435  
    reforming, 537  
    sexual excitement in, 536, 540  
    sexual sensibility of, 591  
    who walk, the, 705  
    why they become prostitutes, 578  
    wild oats as cause of sterility in,  
    462

Worn-out woman, the, 677, 709  
Worry, as cause of impotence, 92

## X

X-rays, cause sterility, 95  
    detection of pregnancy by, 237  
    for removal of "mother's marks,"  
    243

## Z

Zones, erotogenous. 22



# ADVERTISEMENTS

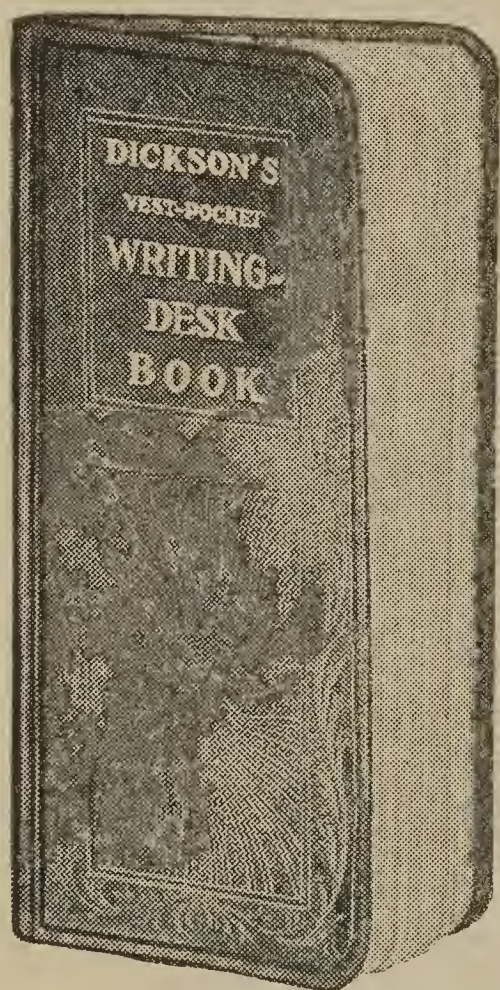


# DICKSON'S VEST POCKET WRITING DESK BOOK

By PROF. HENRY DICKSON

A Complete Guide to Correct Letter-Writing Combined With  
the Complete Self-Pronouncing Dictionary of  
the English Language

**T**HIS book is designed for all who write. The study of it will enable you to learn to write letters that will be practically free from errors; especially the more common errors that brand the writer as an uneducated and illiterate person. A well written letter is the true index of your best thoughts. Next to correct speech, the most desirable of all accomplishments is the ability to write a correct letter.



## Do You Want to Know

- HOW to Pronounce.
- HOW to Punctuate.
- HOW to Spell Correctly.
- HOW to Use Capital Letters.
- HOW to Avoid Common Errors.
- HOW to Use Familiar Quotations.
- HOW to Use Common Abbreviations.
- HOW to Use Latin Words and Phrases.
- HOW to Use French Words and Phrases.
- HOW to Correct Proof.
- HOW to Use Synonyms and Antonyms.
- HOW to Understand Business Law.

## Worth Its Weight in Gold

This Book Contains a Self-Pronouncing Dictionary of the English Language, Rules for Spelling, Punctuation and Capitalization; Synonyms and Antonyms, Homophonous Words, French and Latin Phrases and Words; Familiar Allusions, Postal Information, Daily Business and Commercial Law, Parliamentary Law, Bankruptcy Laws, and Interest Laws of all States; Weights and Measures, Important Historical Events.

Bound in Red Flexible Kraft Leather. Stamped in Gold.

300 Pages Printed on Thin Bible Paper.

Price \$1.25, Postpaid

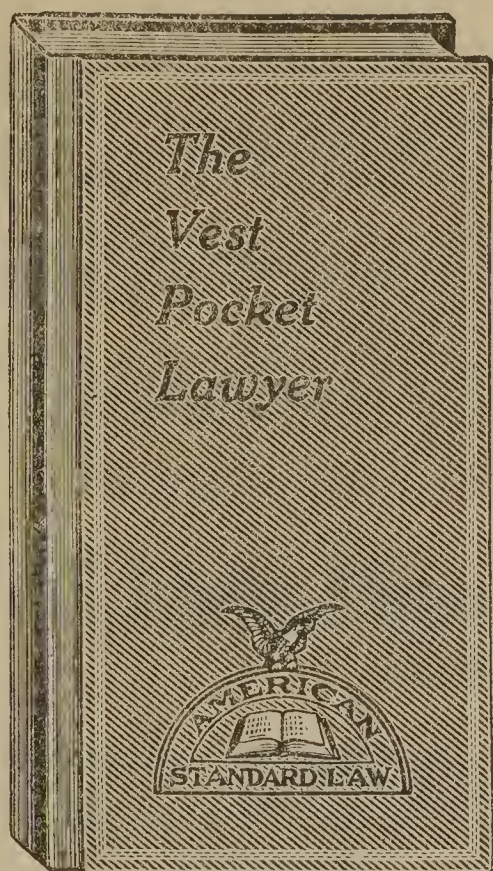
**SCIENCE PUBLISHING COMPANY**

Uninc.

538 South Clark Street

Chicago





## THE VEST POCKET LAWYER

The Only Book of Its Kind

Here at last—in a single volume—a complete law course—clearly analyzed in understandable English. It is a daily guide—a manual of reference for the business man—the law student—the justice of the peace—the notary public—the farmer—the clergyman—the merchant—the banker—the doctor.

Just as the Lawyer Advises

—You too can know the law.

—What to do and what to avoid.

—How to draw up legal forms.

Ask Any Question—This Book  
Has the Answer.

Use the Vest Pocket Lawyer to look up any point of law or any legal form—just as you look up a word in Webster's Dictionary.

It doesn't just give you an opinion, but it gives you the LAW and the REASON WHY. It also gives you a SUPPOSED case in every instance. Nothing complicated; just the LAW as standardized for the past one hundred years. Ask your question just as you would ask your lawyer; only instead of SPEAKING you look up the INDEX of this little book. In the index you will find the subject of your question followed by the NUMBER of the paragraph containing the ANSWER and the SUPPOSED case.

### CONTENTS

Assignments  
Accident, Fire and Life Insurance  
Workmen's Compensation  
Patents  
Insurance  
Trade Acceptances  
Contracts  
Quasi Contracts  
Agency  
Torts  
Domestic Relations  
Criminal Law

Personal Property  
Landlord and Tenant  
Wills  
Real Estate  
Real Estate Mortgages  
Chattel Mortgages  
Evidence  
Negotiable Instruments  
Pleading  
Common Law Pleading  
Equity Pleading  
Code Pleading

Practice  
Constitutional Law  
Partnership  
Corporations  
Judgments  
Attachments  
Garnishments  
Executions  
Bankruptcy  
Constitution of the United States  
112 Legal Forms

### What Is a Trade Acceptance?

Do You Know How to Make a Valid Bill of Sale, Power of Attorney, Warranty Deed or Assignment? Can You Make a Valid Will so as to Preserve Your Estate for Your Wife and Children? What is the Proper Form for a Farm Lease? Who has Title to the Farm When a Mortgage is Put on the Farm—the Farmer or the Man Who Loans the Money? How is a Mortgage Foreclosed? What Does the Farmer Have to Do in Order to Redeem His Farm?

The "Vest Pocket Lawyer" not only tells you the law and just how to use it, but gives you 112 legal forms for drawing up papers of all kinds.

Endorsed by Lawyers, Bankers, Students and Big Business Men

This Book Will Save You Many a Ten Dollar Bill

360 Pages—Printed on Thin Bible Paper—Substantially Bound  
in Red Silk Cloth

Price \$1.25, Postpaid

**SCIENCE PUBLISHING COMPANY**

Uninc.

538 South Clark Street

Chicago

## **Square Sane and Honest**

In the first chapter of **Woman: Her Sex and Love Life**, Dr. Robinson says: "The task I have put before myself in this book is to give our girls and women sane, square and honest information about their sex organs and sex nature, information absolutely free from luridness, on the one hand, and maudlin sentimentality, on the other."

And his concluding words are: "I trust that **Woman: Her Sex and Love Life** will help, in some slight degree, in spreading healthy, sane and honest ideas about sex among the men and women of America."

In working out this aim, Dr. Robinson is wholly practical. His purpose is to assist women in the comprehension and development of their sexual life.

---

# **Woman: Her Sex and Love Life**

By DR. WM. J. ROBINSON

—deals fully with the larger aspects of the subject, but equally with the "small things" that often make or break love and life.

The book isn't simply a treatise on the structure of the sex organs; it is instinct with an inspiring philosophy of love and life.

It is a *complete* book, by a physician with a wholly human outlook, an exponent of the humanized science of our day.

Women, even more than men, require the fullest information about sex. Ignorance in matters sexual is more disastrous to women than to men.

The simple practical points in this book would render millions of homes happier; prevent the disruption of many a family; and show how to preserve love and sexual attraction.

It destroys many injurious errors, and teaches truths that have never been presented in a book before.

The delicacy of the book is charming; the presentation free from either grossness or prudery.

*Price \$3.00 Postpaid*

### **JUST A FEW OF THE CHAPTERS**

The Female Sex Organs.  
The Sex Instinct.  
Puberty.  
The Hygiene of Menstruation.  
Pregnancy.  
Disorders of Pregnancy.  
Size of the Fetus.  
Lactation or Nursing.  
Abortion and Miscarriage.  
Menopause or Change of Life.  
Masturbation.  
Venereal Diseases.  
Vulvovaginitis in Little Girls.  
Venereal Prophylaxis.  
Alcohol, Sex and Venereal Disease.

Who May and Who May Not Marry.  
Birth Control.  
Vaginismus.  
Sterility.  
The Hymen.  
Frigidity in Women.  
Single Standard of Sexual Morality.  
Rational Divorce System.  
What Is Love?  
Advice to the Married and Those About To Be.  
Difference Between the Sex and Love Life of Man and Woman.  
Jealousy and How to Combat It, etc., etc.

## **THE CRITIC AND GUIDE**

**12 Mt. Morris Park West**  
Book Dept.

**New York City**











